

Missouri

UNIFORM APPLICATION
FY 2017 BEHAVIORAL HEALTH REPORT
SUBSTANCE ABUSE PREVENTION AND TREATMENT
BLOCK GRANT

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Center for Substance Abuse Prevention
Division of State Programs

Center for Substance Abuse Treatment
Division of State and Community Assistance

I: State Information

State Information

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III. Expenditure Period

State Expenditure Period

From 7/1/2015

To 6/30/2016

Block Grant Expenditure Period

From 10/1/2013

To 9/30/2015

IV. Date Submitted

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Footnotes:

II: Annual Report

Table 1 Priority Area and Annual Performance Indicators - Progress Report

Priority #: 1

Priority Area: Coordination of Primary Care and Behavioral Health Services

Priority Type: SAT, MHS

Population(s): SMI, SED

Goal of the priority area:

Coordinate consumers' primary and behavioral healthcare in order to improve consumer health and reduce medical costs

Strategies to attain the goal:

- 1) Continue to coordinate preventive and primary care for Health Home participants
- 2) Conduct pilot of Children's Health Home project focusing on children with serious emotional disturbance and obesity
- 3) Continue outreach to Medicaid-enrolled adults who 1) have a substance use disorder or serious mental illness, 2) have high annual healthcare costs, and 3) are not currently enrolled in behavioral health treatment
- 4) Contract with the Missouri Institute for Mental Health for ongoing evaluation of Missouri's Health Homes and Disease Management programs

Annual Performance Indicators to measure goal success

Indicator #: 1

Indicator: Number of participants in Health Homes per fiscal year

Baseline Measurement: 25,278 (FY 2014)

First-year target/outcome measurement: 25,800

Second-year target/outcome measurement: 26,200

New Second-year target/outcome measurement (if needed):

Data Source:

Number of Health Homes participants is determined from a Per Member Per Month (PMPM) data file submitted to DMH from the Missouri Medicaid agency MO Healthnet on a monthly basis. These are individuals who participated at any time during the specified fiscal year.

New Data Source (if needed):

Description of Data:

New Description of Data: (if needed)

Data issues/caveats that affect outcome measures:

N/A

New Data issues/caveats that affect outcome measures:

Report of Progress Toward Goal Attainment

First Year Target: ☒ Achieved ☐ Not Achieved (if not achieved, explain why)

Reason why target was not achieved, and changes proposed to meet target:

How first year target was achieved (optional):

Number of participants in Health Homes in FY 2016 is 35,755.

Indicator #: 2
Indicator: Number of participants in DM 3700 per fiscal year
Baseline Measurement: 2,584 (FY 2014)
First-year target/outcome measurement: 2,625
Second-year target/outcome measurement: 2,700
New Second-year target/outcome measurement (if needed):

Data Source:

DMH information system

New Data Source (if needed):

Description of Data:

These are individuals who participated at any time during the specified fiscal year. A participant in the DM 3700 is defined as a consumer who is listed on the DM 3700 master list and who has an open episode of care for CPS treatment during the specified fiscal year.

New Description of Data: (if needed)

Data issues/caveats that affect outcome measures:

N/A

New Data issues/caveats that affect outcome measures:

Report of Progress Toward Goal Attainment

First Year Target: ☒ Achieved ☐ Not Achieved (if not achieved, explain why)

Reason why target was not achieved, and changes proposed to meet target:

How first year target was achieved (optional):

Number of participants in DM 3700 in FY 2016 is 3,636.

Indicator #: 3
Indicator: Number of participants in ADA Disease Management
Baseline Measurement: 187 (FY 2014)
First-year target/outcome measurement: 800
Second-year target/outcome measurement: 1,200
New Second-year target/outcome measurement (if needed):

Data Source:

DMH Information System

New Data Source (if needed):

Description of Data:

A participant in ADA DM is defined as a consumer who is listed on the ADA Disease Management master list and who has an open episode of care for ADA treatment during the specified fiscal year.

New Description of Data: (if needed)

Data issues/caveats that affect outcome measures:

N/A

New Data issues/caveats that affect outcome measures:

Report of Progress Toward Goal Attainment

First Year Target: ☒ Achieved ☐ Not Achieved *(if not achieved, explain why)*

Reason why target was not achieved, and changes proposed to meet target:

How first year target was achieved *(optional)*:

Number of participants in ADA Disease Management in FY 2016 is 806.

Priority #: 2
Priority Area: Crisis Intervention
Priority Type: SAT, MHS
Population(s): SMI, SED

Goal of the priority area:

Promote safety and emotional stability, minimize further deterioration in mental state, increase access to treatment and support services, and improve individual outcomes for individuals in behavioral health crisis; better utilize limited criminal justice and healthcare resources by linking individuals needing behavioral healthcare services to those services

Strategies to attain the goal:

- 1) Identify and address structural barriers, miscommunications, and consistent patterns that reduce access to behavioral healthcare services
- 2) Provide behavioral health expertise to law enforcement, court personnel, and primary healthcare staff in order to more effectively respond to behavioral health crises
- 3) Advocate for and engage individuals in crisis in behavioral health treatment and support services
- 4) Provide immediate person-centered interventions to individuals in mental health crisis and facilitate timely access to services and supports

Annual Performance Indicators to measure goal success

Indicator #: 1
Indicator: Number of referrals to the Community Mental Health Liaisons
Baseline Measurement: 3,696 (FY 2014)
First-year target/outcome measurement: 5,000
Second-year target/outcome measurement: 5,000
New Second-year target/outcome measurement *(if needed)*:
Data Source:

Number tracked and reported by the Coalition of Community Behavioral Healthcare

New Data Source *(if needed)*:

Description of Data:

N/A

New Description of Data *(if needed)*:

Data issues/caveats that affect outcome measures:

N/A

New Data issues/caveats that affect outcome measures:

Report of Progress Toward Goal Attainment

First Year Target: ☒ Achieved ☐ Not Achieved (if not achieved, explain why)

Reason why target was not achieved, and changes proposed to meet target:

How first year target was achieved (optional):

Number of referrals to the Community Mental Health Liaisons in FY 2016 is 8,189.

Indicator #: 2

Indicator: Number served in the Emergency Room Enhancement project

Baseline Measurement: 852 (FY 2014)

First-year target/outcome measurement: 1,000

Second-year target/outcome measurement: 1,200

New Second-year target/outcome measurement (if needed):

Data Source:

Number served is tracked and reported by the Missouri Institute for Mental Health

New Data Source (if needed):

Description of Data:

N/A

New Description of Data: (if needed)

Data issues/caveats that affect outcome measures:

N/A

New Data issues/caveats that affect outcome measures:

Report of Progress Toward Goal Attainment

First Year Target: ☒ Achieved ☐ Not Achieved (if not achieved, explain why)

Reason why target was not achieved, and changes proposed to meet target:

How first year target was achieved (optional):

Number served in the Emergency Room Enhancement project in FY 2016 is 1,329.

Indicator #: 3

Indicator: Number of new law enforcement officers trained in Crisis Intervention Team

Baseline Measurement: 681 (FY 2014)

First-year target/outcome measurement: at least 400

Second-year target/outcome measurement: at least 400

New Second-year target/outcome measurement (if needed):

Data Source:

Number of law enforcement officers trained in CIT is tracked and reported by NAMI-St. Louis.

New Data Source (if needed):

Description of Data:

N/A

New Description of Data: *(if needed)*

Data issues/caveats that affect outcome measures:

N/A

New Data issues/caveats that affect outcome measures:

Report of Progress Toward Goal Attainment

First Year Target: ☒ Achieved ☐ Not Achieved *(if not achieved, explain why)*

Reason why target was not achieved, and changes proposed to meet target:

How first year target was achieved *(optional)*:

Number of new law enforcement officers trained in Crisis Intervention Team in FY 2016 is 800.

Indicator #:

4

Indicator:

Number of calls to the Access Crisis Intervention (ACI) hotlines

Baseline Measurement:

81,908 (FY 2014)

First-year target/outcome measurement:

at least 80,000

Second-year target/outcome measurement:

at least 80,000

New Second-year target/outcome measurement *(if needed)*:

Data Source:

Number of ACI calls is tracked and reported by the contracted agencies on a quarterly basis

New Data Source *(if needed)*:

Description of Data:

N/A

New Description of Data: *(if needed)*

Data issues/caveats that affect outcome measures:

N/A

New Data issues/caveats that affect outcome measures:

Report of Progress Toward Goal Attainment

First Year Target: ☒ Achieved ☐ Not Achieved *(if not achieved, explain why)*

Reason why target was not achieved, and changes proposed to meet target:

How first year target was achieved *(optional)*:

Number of calls to the Access Crisis Intervention (ACI) hotlines in FY 2016 is 83,985.

Priority Area: Substance Abuse Traffic Offenders' Program (SATOP)

Priority Type: SAT

Population(s): Other (DUI/DWI Offenders)

Goal of the priority area:

Reduce DWI recidivism and initiate treatment services for those with substance use disorder

Strategies to attain the goal:

- 1) Require additional interview questions outside of the Driver Risk Inventory (DRI-II) to ensure assessment consistency
- 2) Implement SATOP-specific continuing education training for SATOP Qualified Professionals
- 3) Evaluate the feasibility of lowering the Blood Alcohol Content (BAC) placement criteria for levels I and II
- 4) Continue to educate judiciary and prosecutors on SATOP screening and referral process

Annual Performance Indicators to measure goal success

Indicator #: 1

Indicator: Implement SATOP specific continuing education training for SATOP Qualified Professionals

Baseline Measurement: N/A

First-year target/outcome measurement: In progress

Second-year target/outcome measurement: Implemented

New Second-year target/outcome measurement(*if needed*):

Data Source:

Implementation of SATOP training considered complete with the award of Continuing Education Units (CEU).

New Data Source(*if needed*):

Description of Data:

N/A

New Description of Data: (*if needed*)

Data issues/caveats that affect outcome measures:

N/A

New Data issues/caveats that affect outcome measures:

Report of Progress Toward Goal Attainment

First Year Target: ☒ Achieved ☐ Not Achieved (*if not achieved, explain why*)

Reason why target was not achieved, and changes proposed to meet target:

How first year target was achieved (*optional*):

Completed in FY 2016.

Indicator #: 2

Indicator: Implement a standardized set of interview questions outside of the DRI-II

Baseline Measurement: N/A

First-year target/outcome measurement: In progress

Second-year target/outcome measurement: Implemented

New Second-year target/outcome measurement(*if needed*):

Data Source:

Input from the subcommittee of SATOP administrators will be required to develop the interview questions. Required implementation is established in SATOP policy.

New Data Source *(if needed)*:

Description of Data:

N/A

New Description of Data: *(if needed)*

Data issues/caveats that affect outcome measures:

N/A

New Data issues/caveats that affect outcome measures:

Report of Progress Toward Goal Attainment

First Year Target: ☒ Achieved ☐ Not Achieved *(if not achieved, explain why)*

Reason why target was not achieved, and changes proposed to meet target:

How first year target was achieved *(optional)*:

Completed in FY 2016.

Priority #: 4

Priority Area: Department of Corrections Community Supervised Offenders

Priority Type: SAT, MHS

Population(s): SMI, PP, Other (Criminal/Juvenile Justice)

Goal of the priority area:

Improve access to clinically appropriate services

Strategies to attain the goal:

- 1) Monitor and target technical assistance to Probation and Parole Officers and treatment providers on the prioritization process for offenders needing substance use disorder treatment in order to facilitate rapid assessment and treatment initiation
- 2) Maintain Memorandum of Understandings (MOU) with the Department of Corrections for coordination of behavioral health treatment services
- 3) Continue the CMHT – Community Mental Health Treatment (mental illness) and MH4 (severe mental illness) programs
- 4) In coordination with DOC, develop a prioritization process for offenders in the CMHT program
- 5) Continue to participate on the DOC Oversight Committee

Annual Performance Indicators to measure goal success

Indicator #: 1

Indicator: Number of High Priority referrals for substance use treatment

Baseline Measurement: 1,560 (FY 2014)

First-year target/outcome measurement: 1,700

Second-year target/outcome measurement: 1,800

New Second-year target/outcome measurement *(if needed)*: at least 1,600

Data Source:

DMH Information System

New Data Source(*if needed*):

Description of Data:

Number of High Priority referrals for substance use disorder treatment is determined from admission data in the DMH information system.

New Description of Data: (*if needed*)

Data issues/caveats that affect outcome measures:

N/A

New Data issues/caveats that affect outcome measures:

Report of Progress Toward Goal Attainment

First Year Target: ☒ Achieved ☐ Not Achieved (*if not achieved, explain why*)

Reason why target was not achieved, and changes proposed to meet target:

Over-estimated use of referral form by parole and probation officers. Oversight committee will meet with parole and probation officers in November to discuss any problems with the use of the form. Revised target for FY 2017.

How first year target was achieved (*optional*):

Indicator #: 2

Indicator: Current MOU between DMH and DOC?

Baseline Measurement: yes (FY 2014)

First-year target/outcome measurement: yes

Second-year target/outcome measurement: yes

New Second-year target/outcome measurement (*if needed*):

Data Source:

MOU documentation is maintained by the DMH contracts unit.

New Data Source(*if needed*):

Description of Data:

N/A

New Description of Data: (*if needed*)

Data issues/caveats that affect outcome measures:

N/A

New Data issues/caveats that affect outcome measures:

Report of Progress Toward Goal Attainment

First Year Target: ☐ Achieved ☒ Not Achieved (*if not achieved, explain why*)

Reason why target was not achieved, and changes proposed to meet target:

How first year target was achieved (*optional*):

MOU between DMH and DOC renewed.

Indicator #: 3
Indicator: Number served in CMHT and MH4 programs
Baseline Measurement: 2,214 (FY 2014)
First-year target/outcome measurement: at least 2,000
Second-year target/outcome measurement: at least 2,000
New Second-year target/outcome measurement(*if needed*): 1,500

Data Source:

DMH Information System

New Data Source(*if needed*):

Description of Data:

Number served in the CMHT and MH4 programs is determined from billing data in the DMH information system.

New Description of Data: (*if needed*)

Data issues/caveats that affect outcome measures:

N/A

New Data issues/caveats that affect outcome measures:

Report of Progress Toward Goal Attainment

First Year Target: ☒ Achieved ☐ Not Achieved (*if not achieved, explain why*)

Reason why target was not achieved, and changes proposed to meet target:

Oversight committee is reviewing programs to identify any barriers. Revised target for FY 2017 to 1,500.

How first year target was achieved (*optional*):

Priority #: 5
Priority Area: Tobacco Prevention / Cessation
Priority Type: SAP, SAT, MHS
Population(s): SMI, SED, Other (Adolescents w/SA and/or MH, Students in College, Rural, Children/Youth at Risk for BH Disorder)

Goal of the priority area:

Reduce tobacco initiation and promote tobacco cessation among vulnerable populations

Strategies to attain the goal:

- 1) Support provider training in tobacco cessation with proven effectiveness
- 2) Promote the inclusion of tobacco cessation in the consumer's behavioral health treatment plan
- 3) Track smoking prevalence in mental health and substance use disorder treatment populations
- 4) Support tobacco cessation on Missouri's college campuses
- 5) Ensure the provision of tobacco enforcement and merchant education:
 - a. Continue contracting with the Food and Drug Administration for the enforcement of federal tobacco control laws
 - b. Maintain a Memorandum of Agreement with the Division of Alcohol and Tobacco Control for state and federal enforcement of tobacco control laws
 - c. Conduct a merchant education visit to every tobacco retailer in the state

Annual Performance Indicators to measure goal success

Indicator #: 1
Indicator: Annual Synar non-compliance rate is less than 20 percent?
Approved: 09/01/2016 Expires: 12/01/2016

Baseline Measurement: yes (FY 2014)

First-year target/outcome measurement: yes

Second-year target/outcome measurement: yes

New Second-year target/outcome measurement(*if needed*):

Data Source:

Synar rate is determined from annual Synar survey. For FY 2016, this will be completed by October 1, 2016. For FY 2017, this will be completed by October 1, 2017.

New Data Source(*if needed*):

Description of Data:

N/A

New Description of Data: (*if needed*)

Data issues/caveats that affect outcome measures:

N/A

New Data issues/caveats that affect outcome measures:

Report of Progress Toward Goal Attainment

First Year Target: ☒ Achieved ☐ Not Achieved (*if not achieved, explain why*)

Reason why target was not achieved, and changes proposed to meet target:

How first year target was achieved (*optional*):

Synar non-compliance rate was 7.7%.

Indicator #:

2

Indicator:

Number of tobacco retailers visited and provided with retailer educational materials per fiscal year

Baseline Measurement:

5,447 (FY 2014)

First-year target/outcome measurement:

at least 5,000

Second-year target/outcome measurement:

at least 5,000

New Second-year target/outcome measurement(*if needed*):

Data Source:

Number of tobacco retailers visited and provided educational materials is documented by prevention agencies, entered into a database by DMH staff, and reported in the State's Annual Synar Report.

New Data Source(*if needed*):

Description of Data:

N/A

New Description of Data: (*if needed*)

Data issues/caveats that affect outcome measures:

N/A

New Data issues/caveats that affect outcome measures:

Report of Progress Toward Goal Attainment

First Year Target: ☒ Achieved ☐ Not Achieved (if not achieved, explain why)

Reason why target was not achieved, and changes proposed to meet target:

How first year target was achieved (optional):

Number of tobacco retailers visited and provided with retailer educational materials in FY 2016 is 5,477.

Indicator #: 3

Indicator: Number of nicotine replacement quit kit items distributed on Missouri college campuses per fiscal year

Baseline Measurement: N/A

First-year target/outcome measurement: 567

Second-year target/outcome measurement: 567

New Second-year target/outcome measurement (if needed): at least 100.

Data Source:

Number of nicotine/replacement quit kit items is tracked and reported to DMH by Partners in Prevention (Missouri's higher education substance abuse consortium)

New Data Source (if needed):

Description of Data:

N/A

New Description of Data: (if needed)

Data issues/caveats that affect outcome measures:

N/A

New Data issues/caveats that affect outcome measures:

Report of Progress Toward Goal Attainment

First Year Target: ☐ Achieved ☒ Not Achieved (if not achieved, explain why)

Reason why target was not achieved, and changes proposed to meet target:

Funding was cut. Revise target for FY 2017 to 'at least 100'.

How first year target was achieved (optional):

Priority #: 6

Priority Area: Recovery Support Services

Priority Type: SAT, MHS

Population(s): SMI, SED, PWWDC, IVDUs, Other (Adolescents w/SA and/or MH, Rural, Criminal/Juvenile Justice, Homeless, Underserved Racial and Ethnic Minorities)

Goal of the priority area:

Provide support services to promote sustained recovery from behavioral health disorders

Strategies to attain the goal:

- 1) Continue the five Drop-In Centers and five Peer Support Phone Lines for persons with mental illness
- 2) Maintain a housing unit to administer the Shelter Plus Care grants to provide housing assistance to long-term DMH consumers
- 3) Promote use of IPS Supported Employment
- 4) Implement an enhanced training curriculum for Family Support Specialists
- 5) Implement the ATR IV grant

Annual Performance Indicators to measure goal success

Indicator #: 1

Indicator: Number of contracts for Consumer Operated Service Programs for persons with mental illness per fiscal year

Baseline Measurement: 10

First-year target/outcome measurement: 10

Second-year target/outcome measurement: 10

New Second-year target/outcome measurement *(if needed)*:

Data Source:

Contracts are maintained by the DMH Contracts Unit.

New Data Source *(if needed)*:

Description of Data:

N/A

New Description of Data: *(if needed)*

Data issues/caveats that affect outcome measures:

N/A

New Data issues/caveats that affect outcome measures:

Report of Progress Toward Goal Attainment

First Year Target: ☒ Achieved ☐ Not Achieved *(if not achieved, explain why)*

Reason why target was not achieved, and changes proposed to meet target:

How first year target was achieved *(optional)*:

Number of contracts for Consumer Operated Service Programs for persons with mental illness in FY 2016 is 10.

Indicator #: 2

Indicator: Number of Supported Employment programs per fiscal year

Baseline Measurement: 11 (FY 2014)

First-year target/outcome measurement: 11

Second-year target/outcome measurement: 12

New Second-year target/outcome measurement *(if needed)*:

Data Source:

The number of IPS Supported Employment programs is tracked by DMH staff.

New Data Source *(if needed)*:

Description of Data:

N/A

New Description of Data: *(if needed)*

Data issues/caveats that affect outcome measures:

N/A

New Data issues/caveats that affect outcome measures:

Report of Progress Toward Goal Attainment

First Year Target: ☒ Achieved ☐ Not Achieved *(if not achieved, explain why)*

Reason why target was not achieved, and changes proposed to meet target:

How first year target was achieved *(optional)*:

Number of Supported Employment programs in FY 2016 is 13.

Indicator #: 3

Indicator: Number of trainings using the enhanced curriculum for Family Support Specialists per fiscal year

Baseline Measurement: N/A

First-year target/outcome measurement: 2

Second-year target/outcome measurement: 2

New Second-year target/outcome measurement *(if needed)*:

Data Source:

The number of Family Support trainings is tracked by the Children's Services Unit.

New Data Source *(if needed)*:

Description of Data:

N/A

New Description of Data: *(if needed)*

Data issues/caveats that affect outcome measures:

N/A

New Data issues/caveats that affect outcome measures:

Report of Progress Toward Goal Attainment

First Year Target: ☒ Achieved ☐ Not Achieved *(if not achieved, explain why)*

Reason why target was not achieved, and changes proposed to meet target:

How first year target was achieved *(optional)*:

Number of trainings using the enhanced curriculum for Family Support Specialists in FY 2016 is 3.

Indicator #: 4

Indicator: Number served in ATR IV

Baseline Measurement: N/A

First-year target/outcome measurement: 1,428

Second-year target/outcome measurement: 1,428

New Second-year target/outcome measurement(*if needed*):

Data Source:

DMH Information System

New Data Source(*if needed*):

Description of Data:

Number served in ATR IV will be tracked in the DMH information system. These are consumers who receive a service funded through the ATR IV program.

New Description of Data: (*if needed*)

Data issues/caveats that affect outcome measures:

N/A

New Data issues/caveats that affect outcome measures:

Report of Progress Toward Goal Attainment

First Year Target: ☒ Achieved ☐ Not Achieved (*if not achieved, explain why*)

Reason why target was not achieved, and changes proposed to meet target:

How first year target was achieved (*optional*):

Number served in ATR IV is 3,479.

Priority #: 7

Priority Area: Medication Assisted Treatment for Addiction

Priority Type: SAT

Population(s): PWWDC, PP, IVDUs

Goal of the priority area:

To further integrate medication therapy into the substance use disorder treatment service delivery system

Strategies to attain the goal:

- 1) Monitor utilization of MAT by provider and provide technical assistance as needed
- 2) Increase utilization of different addiction medications at a given treatment provider
- 3) In collaboration with the drug manufacturer, Missouri Institute for Mental Health (MIMH), and the St. Louis Drug Courts, conduct an Investigator Trial on Vivitrol initiated prior to jail release
- 4) In collaboration with the Department of Corrections and MIMH, conduct a pilot study on the use of Vivitrol among incarcerated women who are released to the community
- 5) Implement the MAT Grant

Annual Performance Indicators to measure goal success

Indicator #: 1

Indicator: Number of consumers receiving MAT

Baseline Measurement: 3,753 (FY 2014)

First-year target/outcome measurement: 4,000

Second-year target/outcome measurement: 4,200

New Second-year target/outcome measurement *(if needed)*:

Data Source:

DMH Information System

New Data Source *(if needed)*:

Description of Data:

Number of consumers receiving medication assisted treatment including use of methadone, Vivitrol, naltrexone, buprenorphine/Suboxone/Subsolv, Antabuse, and acamprosate is determined from medication billings to the DMH information system and Medicaid Claims, excluding billings occurring while in detox.

New Description of Data: *(if needed)*

Data issues/caveats that affect outcome measures:

N/A

New Data issues/caveats that affect outcome measures:

Report of Progress Toward Goal Attainment

First Year Target:



Achieved



Not Achieved *(if not achieved, explain why)*

Reason why target was not achieved, and changes proposed to meet target:

How first year target was achieved *(optional)*:

Number of consumers receiving MAT in FY 2016 is 5,106.

Priority #:

8

Priority Area:

Community Advocacy and Education

Priority Type:

SAP

Population(s):

Other (Rural, Children/Youth at Risk for BH Disorder, Underserved Racial and Ethnic Minorities)

Goal of the priority area:

Create positive community norms; policy change; promote mental wellness; and reduce alcohol, tobacco, and other drug availability in Missouri's communities

Strategies to attain the goal:

- 1) Build state and community capacity by fostering strong partnerships and identifying new opportunities for collaboration
- 2) Further data capacity in support of data-driven strategic planning to include the continuation of the Missouri Study Survey and the Behavioral Health web tool
- 3) Fund evidence-based programming to prevent substance use and bullying among high-risk youth
- 4) Continue the education initiative in Eastern Missouri to address heroin and other opiate drug use

Annual Performance Indicators to measure goal success

Indicator #:

1

Indicator:

Number of heroin and other opiate drug use training and education activities per fiscal year

Baseline Measurement:

80

First-year target/outcome measurement:

80

Second-year target/outcome measurement:

80

New Second-year target/outcome measurement *(if needed)*:

Data Source:

Number of heroin education activities is tracked and reported by the Eastern Regional Support Center.

New Data Source(*if needed*):

Description of Data:

N/A

New Description of Data: (*if needed*)

Data issues/caveats that affect outcome measures:

N/A

New Data issues/caveats that affect outcome measures:

Report of Progress Toward Goal Attainment

First Year Target: ☒ Achieved ☐ Not Achieved (*if not achieved, explain why*)

Reason why target was not achieved, and changes proposed to meet target:

How first year target was achieved (*optional*):

Number of heroin and other opiate drug use training and education activities in FY 2016 is 101.

Indicator #:

2

Indicator:

Number of high-risk youth served in prevention programs per fiscal year

Baseline Measurement:

26,691

First-year target/outcome measurement:

at least 26,000

Second-year target/outcome measurement:

at least 26,000

New Second-year target/outcome measurement(*if needed*): at least 6,100

Data Source:

Reported by contracted providers

New Data Source(*if needed*):

Description of Data:

Numbers of high-risk youth served in prevention programs are tracked and reported by contracted providers.

New Description of Data: (*if needed*)

Data issues/caveats that affect outcome measures:

N/A

New Data issues/caveats that affect outcome measures:

Report of Progress Toward Goal Attainment

First Year Target: ☐ Achieved ☒ Not Achieved (*if not achieved, explain why*)

Reason why target was not achieved, and changes proposed to meet target:

Definition and tracking were changed. Revised target for FY 2017 to 'at least 6,100'.

How first year target was achieved (*optional*):

Indicator #: 3

Indicator: Number of persons trained in Mental Health First Aid by the Regional Support Centers per fiscal year

Baseline Measurement: 1,519 (FY 2014)

First-year target/outcome measurement: 2,200

Second-year target/outcome measurement: 2,200

New Second-year target/outcome measurement (if needed): at least 1,000

Data Source:

Regional Support Centers

New Data Source (if needed):

Description of Data:

The number trained in MHFA are tracked and reported by the Regional Support Centers.

New Description of Data: (if needed)

Data issues/caveats that affect outcome measures:

New Data issues/caveats that affect outcome measures:

Report of Progress Toward Goal Attainment

First Year Target: ☒ Achieved ☐ Not Achieved (if not achieved, explain why)

Reason why target was not achieved, and changes proposed to meet target:

Number of persons trained in Mental Health First Aid by the Regional Support Centers in FY 2017 is 1,237. Had trainer turnover that lowered number of trainings.

How first year target was achieved (optional):

Priority #: 9

Priority Area: School-Based Prevention Education

Priority Type: SAP

Population(s): Other (Rural, Children/Youth at Risk for BH Disorder, Underserved Racial and Ethnic Minorities)

Goal of the priority area:

To delay onset of substance use, reduce use, improve overall school performance, and reduce incidents of violence

Strategies to attain the goal:

- 1) Enhance protective factors and reverse or reduce risk factors for substance use and violence
- 2) Improve academic and social-emotional learning to address risk factors
- 3) Employ interactive techniques that allow for active involvement in learning
- 4) Reinforce prevention skills over time with repeated interventions
- 5) Ensure programming is culturally competent and age appropriate
- 6) Conduct annual fidelity reviews

Annual Performance Indicators to measure goal success

Indicator #: 1

Indicator: Number of students participating in SPIRIT per fiscal year

Baseline Measurement: 7,801 (FY 2014)

First-year target/outcome measurement: at least 7,600

Second-year target/outcome measurement: at least 7,600

New Second-year target/outcome measurement (*if needed*):

Data Source:

SPIRIT participation is tracked and reported by the program evaluator: Missouri Institute for Mental Health.

New Data Source (*if needed*):

Description of Data:

SPIRIT participation is tracked and reported by the program evaluator: Missouri Institute for Mental Health.

New Description of Data: (*if needed*)

Data issues/caveats that affect outcome measures:

New Data issues/caveats that affect outcome measures:

Report of Progress Toward Goal Attainment

First Year Target: ☒ Achieved ☐ Not Achieved (*if not achieved, explain why*)

Reason why target was not achieved, and changes proposed to meet target:

How first year target was achieved (*optional*):

Number of students participating in SPIRIT in FY 2017 is 8,031.

Indicator #: 2

Indicator: Annual report generated?

Baseline Measurement: yes (FY 2014)

First-year target/outcome measurement: yes

Second-year target/outcome measurement: yes

New Second-year target/outcome measurement (*if needed*):

Data Source:

Missouri Institute for Mental Health

New Data Source (*if needed*):

Description of Data:

MIMH generates the annual report which is posted to the DMH public website.

New Description of Data: (*if needed*)

Data issues/caveats that affect outcome measures:

N/A

New Data issues/caveats that affect outcome measures:

Report of Progress Toward Goal Attainment

First Year Target: ☒ Achieved ☐ Not Achieved (if not achieved, explain why)

Reason why target was not achieved, and changes proposed to meet target:

How first year target was achieved (optional):

Annual report generated for FY 2016.

Priority #: 10

Priority Area: Evidence-based Mental Health Practices

Priority Type: MHS

Population(s): SMI, SED

Goal of the priority area:

Continue evidence-based practice to the same standards and fidelity as shown to be effective in research

Strategies to attain the goal:

- 1) Continue support for EBP programs
- 2) Provide on-going monitoring of fidelity in EBP programs

Annual Performance Indicators to measure goal success

Indicator #: 1

Indicator: Number served in Integrated Treatment for Co-Occurring Disorders (ITCOD)

Baseline Measurement: 1,750 (FY 2014)

First-year target/outcome measurement: at least 1,600

Second-year target/outcome measurement: at least 1,600

New Second-year target/outcome measurement (if needed):

Data Source:

DMH information system

New Data Source (if needed):

Description of Data:

Number served based on billing data submitted via the DMH information system.

New Description of Data: (if needed)

Data issues/caveats that affect outcome measures:

New Data issues/caveats that affect outcome measures:

Report of Progress Toward Goal Attainment

First Year Target: ☒ Achieved ☐ Not Achieved (if not achieved, explain why)

Reason why target was not achieved, and changes proposed to meet target:

How first year target was achieved (optional):

Number served in Integrated Treatment for Co-Occurring Disorders (ITCOD) in FY 2016 is 2,109.

Indicator #:

2

Indicator: Number served in Assertive Community Treatment (ACT)

Baseline Measurement: 654 (FY 2014)

First-year target/outcome measurement: at least 600

Second-year target/outcome measurement: at least 600

New Second-year target/outcome measurement(*if needed*):

Data Source:

DMH information system

New Data Source(*if needed*):

Description of Data:

Number served based on billing data submitted via the DMH information system.

New Description of Data: (*if needed*)

Data issues/caveats that affect outcome measures:

New Data issues/caveats that affect outcome measures:

Report of Progress Toward Goal Attainment

First Year Target: ☒ Achieved ☐ Not Achieved (*if not achieved, explain why*)

Reason why target was not achieved, and changes proposed to meet target:

How first year target was achieved (*optional*):

Number served in Assertive Community Treatment (ACT) in FY 2016 is 728.

Priority #: 11

Priority Area: IV Drug Users

Priority Type: SAT

Population(s): IVDUs

Goal of the priority area:

Ensure the provision of services to IV drug users in accordance with Substance Abuse Prevention and Treatment Block Grant statutory requirements

Strategies to attain the goal:

- 1) Monitor contractual requirements pertaining to IV drug users
- 2) Continue collecting wait list and capacity management data from contracted providers
- 3) Generate reports for wait list data and interim services billings in support of monitoring efforts
- 4) Increase one-on-one discussions with key provider

Annual Performance Indicators to measure goal success

Indicator #: 1

Indicator: Number of IV drug users served in substance use treatment per fiscal year (assuming same level of funding)

Baseline Measurement: 9,288 (FY 2014)

First-year target/outcome measurement: at least 9,000

Second-year target/outcome measurement: at least 9,000

New Second-year target/outcome measurement *(if needed)*:

Data Source:

DMH information system

New Data Source *(if needed)*:

Description of Data:

Number served based on billing data submitted to the DMH information system. These are individuals for whom a paid claim on a substance use disorder treatment program was submitted to and paid by DMH. Injection drug use is determined from the TEDS data also captured in the DMH information system. The route of substance was IV injection or non-IV injection on the primary, secondary, or tertiary substances.

New Description of Data: *(if needed)*

Data issues/caveats that affect outcome measures:

N/A

New Data issues/caveats that affect outcome measures:

Report of Progress Toward Goal Attainment

First Year Target: ☒ Achieved ☐ Not Achieved *(if not achieved, explain why)*

Reason why target was not achieved, and changes proposed to meet target:

How first year target was achieved *(optional)*:

Number of IV drug users served in SUD treatment in FY 2016 is 10,319.

Indicator #:

2

Indicator:

Percent of SAPT Block Grant funded providers reporting wait list and capacity management data

Baseline Measurement:

100% (FY 2014)

First-year target/outcome measurement:

100%

Second-year target/outcome measurement:

100%

New Second-year target/outcome measurement *(if needed)*:

Data Source:

DBH Research staff monitor wait list and capacity management reporting and follow-up with providers if they do not meet submission deadlines.

New Data Source *(if needed)*:

Description of Data:

DBH Research staff monitor wait list and capacity management reporting and follow-up with providers if they do not meet submission deadlines.

New Description of Data: *(if needed)*

Data issues/caveats that affect outcome measures:

N/A

New Data issues/caveats that affect outcome measures:

Report of Progress Toward Goal Attainment

First Year Target: ☒ Achieved ☐ Not Achieved (if not achieved, explain why)

Reason why target was not achieved, and changes proposed to meet target:

How first year target was achieved (optional):

Percent of Block Grant funded providers reporting wait list data in FY 2016 is 100%.

Priority #: 12

Priority Area: Substance-Abusing Pregnant Women and Women with Dependent Children

Priority Type: SAT

Population(s): PWWDC

Goal of the priority area:

Continue to provide services to pregnant women and women with dependent children

Strategies to attain the goal:

- 1) Monitor contractual compliance with regard to admission of pregnant women to substance use disorder treatment
- 2) Continue collecting wait list and capacity management data from contracted providers
- 3) Engage TANF referred individuals in substance use disorder treatment at a clinically appropriate level of care

Annual Performance Indicators to measure goal success

Indicator #: 1

Indicator: 1) Number of pregnant women and women with dependent children served in substance use disorder treatment per fiscal year (assuming the same level of funding)

Baseline Measurement: 6,307 (FY 2014)

First-year target/outcome measurement: at least 6,000

Second-year target/outcome measurement: at least 6,000

New Second-year target/outcome measurement (if needed):

Data Source:

DMH information system

New Data Source (if needed):

Description of Data:

The number of pregnant women and women with dependent children served is captured in the DMH information system. These are individuals for which a paid claim was submitted to and paid by DMH. Pregnancy status and number of dependent children are also captured.

New Description of Data: (if needed)

Data issues/caveats that affect outcome measures:

N/A

New Data issues/caveats that affect outcome measures:

Report of Progress Toward Goal Attainment

First Year Target: ☒ Achieved ☐ Not Achieved (if not achieved, explain why)

Reason why target was not achieved, and changes proposed to meet target:

How first year target was achieved (optional):

Number of pregnant women and women with dependent children served in substance abuse treatment in FY 2016 is 6,267.

Priority #: 13
Priority Area: Infectious Disease Prevention and Treatment
Priority Type: SAT
Population(s): HIV EIS, TB

Goal of the priority area:

Reduce the incidence of HIV/TB/STDs/Hepatitis among consumers in substance use disorder treatment and those in close contact with consumers; have all consumers get screened for HIV/TB/STDs/Hepatitis; and have consumers needing treatment for HIV/TB/STDs/Hepatitis get linked to the appropriate services

Strategies to attain the goal:

- 1) Contractually require programs to
 - a. Have a working relationship with the local health department, physician, or other qualified healthcare provider in the community to provide any necessary testing services for HIV/TB/STDs/HepatitisArrange for HIV/TB/STDs/Hepatitis testing to be available to the client at any time during the course of the client's treatment,
 - b. Provide post-testing counseling for clients testing positive for HIV or TB, and
 - c. Provide education to clients and family members on the risks of HIV/TB/STDs/Hepatitis
- 2) Continue to track TB-related expenditures as required by federal regulations §96.127
- 3) Provide infectious disease training to provider staff

Annual Performance Indicators to measure goal success

Indicator #: 1
Indicator: Conducted survey of providers and developed technical assistance plan?
Baseline Measurement: N/A
First-year target/outcome measurement: In progress
Second-year target/outcome measurement: Completed
New Second-year target/outcome measurement (if needed):
Data Source:

Workgroup progress report

New Data Source (if needed):

Description of Data:

Survey instrument will be developed by a workgroup consisting of DBH clinical treatment and research staff. Information from the survey as well as data from the DMH information system pertaining to HIV/TB/STDs/Hepatitis will be used to develop a plan for training and technical assistance.

New Description of Data: (if needed)

Data issues/caveats that affect outcome measures:

N/A

New Data issues/caveats that affect outcome measures:

Report of Progress Toward Goal Attainment

First Year Target: ☒ Achieved ☐ Not Achieved (if not achieved, explain why)

Reason why target was not achieved, and changes proposed to meet target:

How first year target was achieved *(optional)*:

Survey completed. Workgroup meeting weekly. Plan in development.

Priority #: 14

Priority Area: Mental Health Services for Transition-Aged Youth and Young Adults

Priority Type: MHS

Population(s): SMI, SED

Goal of the priority area:

To increase knowledge of effective interventions and supports and enhance skills of individuals who work with transition age youth/young adults and their families

Strategies to attain the goal:

- 1) Develop a Transitional Age Youth/Young Adult training presentation for community system of care providers that will
 - Provide information on important developmental interventions
 - Identify and individualize important learning objectives for audience members
 - Identify and increase awareness of resources necessary for effective transition services and supports
- 2) Conduct "Transition Age Youth/Young Adult" presentations at conferences or workshops
- 3) Develop a "template" training presentation for community system of care providers that can be customized by the Community System of Care teams
- 4) Develop a "Transition Age Youth/Young Adult" resource webpage

Annual Performance Indicators to measure goal success

Indicator #: 1

Indicator: Number of new communities that customize the "template" training presentation to their local system of care per fiscal year

Baseline Measurement: N/A

First-year target/outcome measurement: 1

Second-year target/outcome measurement: 2

New Second-year target/outcome measurement *(if needed)*:

Data Source:

Tracked and reported by the Children's Unit.

New Data Source *(if needed)*:

Description of Data:

Tracked and reported by the Children's Unit.

New Description of Data: *(if needed)*

Data issues/caveats that affect outcome measures:

N/A

New Data issues/caveats that affect outcome measures:

Report of Progress Toward Goal Attainment

First Year Target: ☒ Achieved ☐ Not Achieved *(if not achieved, explain why)*

Reason why target was not achieved, and changes proposed to meet target:

How first year target was achieved *(optional)*:

Number of new communities that customize the "template" training presentation to their local system of care in FY 2016 is 1.

Indicator #: 2

Indicator: Number of conference or workshop trainings on Transition Age Youth/Young Adult per fiscal year

Baseline Measurement: 6 (FY 2014)

First-year target/outcome measurement: at least 1

Second-year target/outcome measurement: at least 2

New Second-year target/outcome measurement (if needed):

Data Source:

Tracked and reported by the Children's Unit.

New Data Source (if needed):

Description of Data:

Tracked and reported by the Children's Unit.

New Description of Data: (if needed)

Data issues/caveats that affect outcome measures:

N/A

New Data issues/caveats that affect outcome measures:

Report of Progress Toward Goal Attainment

First Year Target: ☒ Achieved ☐ Not Achieved (if not achieved, explain why)

Reason why target was not achieved, and changes proposed to meet target:

How first year target was achieved (optional):

Number of conference or workshop trainings on Transition Age Youth/Young Adult in FY 2016 is 20.

Indicator #: 3

Indicator: Resource webpage for Transition Age Youth/Young Adult?

Baseline Measurement: N/A

First-year target/outcome measurement: In progress

Second-year target/outcome measurement: Implemented

New Second-year target/outcome measurement (if needed):

Data Source:

Children's Unit will track and report progress on resource webpage.

New Data Source (if needed):

Description of Data:

Webpage implementation defined as when page(s) are placed into production.

New Description of Data: (if needed)

Data issues/caveats that affect outcome measures:

N/A

New Data issues/caveats that affect outcome measures:

Report of Progress Toward Goal Attainment

First Year Target: ☒ Achieved ☐ Not Achieved (if not achieved, explain why)

Reason why target was not achieved, and changes proposed to meet target:

How first year target was achieved (optional):

Resource webpage for Transition Age Youth/Young Adult is complete.

Priority #: 15

Priority Area: Behavioral Healthcare Services for Children

Priority Type: SAT, MHS

Population(s): SED, Other (Adolescents w/SA and/or MH)

Goal of the priority area:

To enhance Children's Behavioral Health services by increasing the knowledge of effective services, supports and interventions, enhancing the skills of service providers and expanding services based on the needs of the children, youth and families served.

Strategies to attain the goal:

- 1) Expand access to Treatment Family Homes (TFH), Parent Professional Homes (PPH) and Family Support Providers (FSP) to children, youth and their families receiving services through the Adolescent C-STAR Program.
 - Revise MO State Plan to include TFH, PPH and FSP services for Adolescent C-STAR and propose to CMS. Continue to revise proposal as needed in response to CMS review and feedback.
 - Develop training curriculum related to TFH, PPH and FSP services and the specific needs of children, youth and their families eligible for Adolescent C-STAR services
 - Pending CMS approval of CSTAR revised MO State Plan proposal, provide training to DBH service providers using curriculum developed related to TFH, PPH and FSP services and the specific needs of children, youth and their families eligible for Adolescent C-STAR services.
- 2) Depending on the state of the economy as directed by state government, prepare to submit a budget request for increased funding to support additional ACT Teams for Transitional Age Youth.
- 3) Include a "monthly" news blast section in existing DBH Newsletter to distribute articles, research and stories specific to behavioral health and early childhood, children, youth and their families.
- 4) Develop a partnership with the Department of Elementary and Secondary Education (DESE) to improve transition planning and services from high school to post-secondary education and/or employment for children and youth receiving DBH services.
 - DBH Staff from children's services and employment services will participate on a state level transitions team with DESE to develop strategies for expanding and enhancing local school-based transition teams.
- 5) DBH service providers will actively participate on local school-based transition teams for the children and youth receiving DBH services.

Annual Performance Indicators to measure goal success

Indicator #: 1

Indicator: Submission of a revised state plan to Mo HealthNet (Medicaid) to add Treatment Family Home, Parent Professional Homes, and Family Support Provider services for the Adolescent CSTAR program

Baseline Measurement: N/A

First-year target/outcome measurement: In progress

Second-year target/outcome measurement: Submitted

New Second-year target/outcome measurement(if needed):

Data Source:

The Division of Behavioral Health's Children's Team will collect information related to the progress of the proposal process for submitted revisions to the MO State Plan to CMS.

New Data Source(*if needed*):

Description of Data:

The Division of Behavioral Health's Children's Team will collect information related to the progress of the proposal process for submitted revisions to the MO State Plan to CMS.

New Description of Data: (*if needed*)

Data issues/caveats that affect outcome measures:

N/A

New Data issues/caveats that affect outcome measures:

Report of Progress Toward Goal Attainment

First Year Target: ☒ Achieved ☐ Not Achieved (*if not achieved, explain why*)

Reason why target was not achieved, and changes proposed to meet target:

How first year target was achieved (*optional*):

Completed with revisions. It was decided that only Family Support Provider services would be added to the State Plan.

Indicator #:

2

Indicator:

"Monthly" electronic news blast in DBH Newsletter per fiscal year

Baseline Measurement:

N/A

First-year target/outcome measurement: 10

Second-year target/outcome measurement: 10

New Second-year target/outcome measurement(*if needed*):

Data Source:

Children's Unit will track and report number of news blasts distributed.

New Data Source(*if needed*):

Description of Data:

Children's Unit will track and report number of news blasts distributed.

New Description of Data: (*if needed*)

Data issues/caveats that affect outcome measures:

N/A

New Data issues/caveats that affect outcome measures:

Report of Progress Toward Goal Attainment

First Year Target: ☐ Achieved ☒ Not Achieved (*if not achieved, explain why*)

Reason why target was not achieved, and changes proposed to meet target:

Will establish new procedures for submitting and tracking news blasts.

How first year target was achieved (*optional*):

Indicator #: 3
Indicator: Number of DBH staff members participating on state level team per fiscal year
Baseline Measurement: N/A
First-year target/outcome measurement: 3
Second-year target/outcome measurement: 3

New Second-year target/outcome measurement(*if needed*):

Data Source:

Children's Unit will track and report number of DBH staff participating on the state level transition teams.

New Data Source(*if needed*):

Description of Data:

Children's Unit will track and report number of DBH staff participating on the state level transition teams.

New Description of Data: (*if needed*)

Data issues/caveats that affect outcome measures:

N/A

New Data issues/caveats that affect outcome measures:

Report of Progress Toward Goal Attainment

First Year Target: ☒ Achieved ☐ Not Achieved (*if not achieved, explain why*)

Reason why target was not achieved, and changes proposed to meet target:

How first year target was achieved (*optional*):

Number of DBH staff members participating on the state level team in FY 2016 is 3.

Indicator #: 4
Indicator: Number of DBH providers participating on local school-based transition teams per fiscal year
Baseline Measurement: N/A
First-year target/outcome measurement: at least 5
Second-year target/outcome measurement: at least 10

New Second-year target/outcome measurement(*if needed*):

Data Source:

Children's Unit will track and report number of DBh providers participating on local school-based transition teams

New Data Source(*if needed*):

Description of Data:

Children's Unit will track and report number of DBh providers participating on local school-based transition teams

New Description of Data: (*if needed*)

Data issues/caveats that affect outcome measures:

N/A

New Data issues/caveats that affect outcome measures:

Report of Progress Toward Goal Attainment

First Year Target: ☒ Achieved ☐ Not Achieved *(if not achieved, explain why)*

Reason why target was not achieved, and changes proposed to meet target:

How first year target was achieved *(optional)*:

Number of DBH providers participating on local school-based transition teams in FY 2016 is 7.

Priority #: 16

Priority Area: Military Servicemembers and Veterans

Priority Type: SAT, MHS

Population(s): Other (Military Families)

Goal of the priority area:

Increase use of treatment services by servicemembers and veterans

Strategies to attain the goal:

- 1) Enhance identifying military-connected clients during intake
- 2) Promote military cultural competency training with behavioral health professionals
- 3) Reduce stigma to seeking services through education
- 4) Raise awareness of services/programs offered in local communities

Annual Performance Indicators to measure goal success

Indicator #: 1

Indicator: Number of veterans receiving substance use treatment per fiscal year

Baseline Measurement: 2,987 (FY 2014)

First-year target/outcome measurement: 3,046

Second-year target/outcome measurement: 3,107

New Second-year target/outcome measurement *(if needed)*: at least 2,100

Data Source:

DMH information system

New Data Source *(if needed)*:

Description of Data:

Numbers of consumers with military service are determined by consumer military history and includes active, honorable discharged, medical discharged, less than honorable discharged, inactive reserve, active reserve, National Guard, and non-specified Veteran. A consumer is counted if a paid claim was incurred at a contracted provider or a non-deleted claim was submitted to CIMOR for a state facility.

New Description of Data: *(if needed)*

Data issues/caveats that affect outcome measures:

N/A

New Data issues/caveats that affect outcome measures:

Report of Progress Toward Goal Attainment

First Year Target:



Achieved



Not Achieved (if not achieved, explain why)

Reason why target was not achieved, and changes proposed to meet target:

Number of veterans receiving SUD treatment in FY 2016 is 2,335. Revised target for FY 2017.

How first year target was achieved (optional):

Indicator #:

2

Indicator:

Number of veterans receiving mental health treatment per fiscal year

Baseline Measurement:

1,724 (FY 2014)

First-year target/outcome measurement:

1,758

Second-year target/outcome measurement:

1,793

New Second-year target/outcome measurement (if needed): at least 1,500

Data Source:

DMH information system

New Data Source (if needed):

Description of Data:

Numbers of consumers with military service are determined by consumer military history and includes active, honorable discharged, medical discharged, less than honorable discharged, inactive reserve, active reserve, National Guard, and non-specified Veteran. A consumer is counted if a paid claim was incurred at a contracted provider or a non-deleted claim was submitted to CIMOR for a state facility.

New Description of Data: (if needed)

Data issues/caveats that affect outcome measures:

N/A

New Data issues/caveats that affect outcome measures:

Report of Progress Toward Goal Attainment

First Year Target:



Achieved



Not Achieved (if not achieved, explain why)

Reason why target was not achieved, and changes proposed to meet target:

Number of veterans receiving mental health treatment in FY 2016 is 1,739. Revised target for FY 2017.

How first year target was achieved (optional):

Footnotes:

III: Expenditure Reports

Table 2 - State Agency Expenditure Report

This table provides a report of SABG and State expenditures by the State Substance Abuse Authority during the State fiscal year immediately preceding the federal fiscal year for which the state is applying for funds for authorized activities to prevent and treat substance abuse. For detailed instructions, refer to those in the Block Grant Application System (BGAS).

Expenditure Period Start Date: 7/1/2015 Expenditure Period End Date: 6/30/2016

Activity (See instructions for using Row 1.)	A. SA Block Grant	B. MH Block Grant	C. Medicaid (Federal, State, and Local)	D. Other Federal Funds (e.g., ACF (TANF), CDC, CMS (Medicare) SAMHSA, etc.)	E. State Funds	F. Local Funds (excluding local Medicaid)	G. Other
1. Substance Abuse Prevention* and Treatment	\$20,249,717		\$43,239,464	\$3,123,426	\$42,151,882	\$0	\$0
a. Pregnant Women and Women with Dependent Children*	\$2,757,495		\$2,028,906	\$0	\$5,926,647	\$0	\$0
b. All Other	\$17,492,222		\$41,210,558	\$3,123,426	\$36,225,235	\$0	\$0
2. Substance Abuse Primary Prevention	\$5,735,385		\$0	\$1,489,285	\$1,155,604	\$0	\$0
3. Tuberculosis Services	\$0		\$51	\$0	\$0	\$0	\$0
4. HIV Early Intervention Services**	\$0		\$0	\$0	\$0	\$0	\$0
5. State Hospital							
6. Other 24 Hour Care							
7. Ambulatory/Community Non-24 Hour Care							
8. Mental Health Primary Prevention							
9. Evidenced Based Practices for First Episode Psychosis (10% of the state's total MHBG award)							
10. Administration (Excluding Program and Provider Level)	\$1,177,462		\$0	\$843,860	\$1,123,597	\$0	\$0
11. Subtotal (Row 1, 2, 3, 4, 8, 9 and 10)	\$27,162,564	\$0	\$43,239,515	\$5,456,571	\$44,431,083	\$0	\$0
12. Subtotal (Row 5, 6, 7 and 10)	\$1,177,462	\$0	\$0	\$843,860	\$1,123,597	\$0	\$0
13. Total	\$27,162,564	\$0	\$43,239,515	\$5,456,571	\$44,431,083	\$0	\$0

* Prevention other than primary prevention

** Only HIV designated states should enter information in this row

Please indicate the expenditures are actual or estimated.

☒ Actual ☐ Estimated

Footnotes:

Total State Expenditures equal \$44,431,083 plus the state portion of Medicaid Match \$15,046,540 for a total state expenditures of \$59,477,623.

III: Expenditure Reports

Table 3 - SAPT Block Grant Expenditure By Service

Expenditure Period Start Date: 7/1/2015 Expenditure Period End Date: 6/30/2016

Service	Expenditures
Healthcare Home/Physical Health	\$
Specialized Outpatient Medical Services;	
Acute Primary Care;	
General Health Screens, Tests and Immunizations;	
Comprehensive Care Management;	
Care coordination and Health Promotion;	
Comprehensive Transitional Care;	
Individual and Family Support;	
Referral to Community Services Dissemination;	
Prevention (Including Promotion)	\$
Screening, Brief Intervention and Referral to Treatment ;	
Brief Motivational Interviews;	
Screening and Brief Intervention for Tobacco Cessation;	
Parent Training;	
Facilitated Referrals;	
Relapse Prevention/Wellness Recovery Support;	
Warm Line;	
Substance Abuse (Primary Prevention)	\$
Classroom and/or small group sessions (Education);	
Media campaigns (Information Dissemination);	
Systematic Planning/Coalition and Community Team Building(Community Based Process);	

Parenting and family management (Education);	
Education programs for youth groups (Education);	
Community Service Activities (Alternatives);	
Student Assistance Programs (Problem Identification and Referral);	
Employee Assistance programs (Problem Identification and Referral);	
Community Team Building (Community Based Process);	
Promoting the establishment or review of alcohol, tobacco, and drug use policies (Environmental);	
Engagement Services	\$
Assessment;	
Specialized Evaluations (Psychological and Neurological);	
Service Planning (including crisis planning);	
Consumer/Family Education;	
Outreach;	
Outpatient Services	\$
Evidenced-based Therapies;	
Group Therapy;	
Family Therapy ;	
Multi-family Therapy;	
Consultation to Caregivers;	
Medication Services	\$
Medication Management;	
Pharmacotherapy (including MAT);	
Laboratory services;	
Community Support (Rehabilitative)	\$
Parent/Caregiver Support;	

Skill Building (social, daily living, cognitive);	
Case Management;	
Behavior Management;	
Supported Employment;	
Permanent Supported Housing;	
Recovery Housing;	
Therapeutic Mentoring;	
Traditional Healing Services;	
Recovery Supports	\$
Peer Support;	
Recovery Support Coaching;	
Recovery Support Center Services;	
Supports for Self-directed Care;	
Other Supports (Habilitative)	\$
Personal Care;	
Homemaker;	
Respite;	
Supported Education;	
Transportation;	
Assisted Living Services;	
Recreational Services;	
Trained Behavioral Health Interpreters;	
Interactive Communication Technology Devices;	
Intensive Support Services	\$
Substance Abuse Intensive Outpatient (IOP);	

Partial Hospital;	
Assertive Community Treatment;	
Intensive Home-based Services;	
Multi-systemic Therapy;	
Intensive Case Management ;	
Out-of-Home Residential Services	\$
Children's Mental Health Residential Services;	
Crisis Residential/Stabilization;	
Clinically Managed 24 Hour Care (SA);	
Clinically Managed Medium Intensity Care (SA) ;	
Adult Mental Health Residential ;	
Youth Substance Abuse Residential Services;	
Therapeutic Foster Care;	
Acute Intensive Services	\$
Mobile Crisis;	
Peer-based Crisis Services;	
Urgent Care;	
23-hour Observation Bed;	
Medically Monitored Intensive Inpatient (SA);	
24/7 Crisis Hotline Services;	
Other (please list)	\$
Total	\$0

Footnotes:
Missouri is opting out of this table.

III: Expenditure Reports

Table 4 - State Agency SABG Expenditure Compliance Report

Expenditure Period Start Date: 10/1/2013 Expenditure Period End Date: 9/30/2015

Category	FY 2014 SAPT Block Grant Award
1. Substance Abuse Prevention* and Treatment	\$19,960,331
2. Primary Prevention	\$5,927,491
3. Tuberculosis Services	\$1,111
4. HIV Early Intervention Services**	\$0
5. Administration (excluding program/provider level)	\$659,108
6. Total	\$26,548,041

*Prevention other than Primary Prevention

**HIV Designated States

Footnotes:

In FY 2015 Paseo was the only state operated Opioid clinic in Missouri and was 100% block grant funded. It was discovered Medicaid eligible consumers were being served and funded with block grant funds. DMH discovered the error and corrected by a lump sum adjustment in the amount of \$201,647.21 to the block grant funds, thus resulting in over expenditures for the FFY2014 block grant award. DMH was not able to go back and correct previous FFY block grant awards as our Statewide Accounting System was closed for those previous state fiscal years. Total BG treatment expenditures is \$19,960,331 (Table 4, row 1) + \$1,111 (Table 4, row 3) = \$19,961,442 (Table 7, column B).

Amount of primary prevention funds planned for primary prevention programs (this amount should match the total reported in Table 5a and Table 5b) \$4,742,169.

Amount of primary prevention funds in Table 4, Line 2 that are planned for Prevention-SA resource development (this amount should not include funds reported in Table 5a or Table 5b) \$1,185,322.

III: Expenditure Reports

Table 5a - Primary Prevention Expenditures Checklist

Expenditure Period Start Date: Expenditure Period End Date:

Strategy	IOM Target	SAPT Block Grant	Other Federal	State	Local	Other
Information Dissemination	Selective	<input type="text" value="\$194,832"/>	<input type="text" value="\$"/>	<input type="text" value="\$67,879"/>	<input type="text" value="\$"/>	<input type="text" value="\$"/>
Information Dissemination	Indicated	<input type="text" value="\$"/>	<input type="text" value="\$"/>	<input type="text" value="\$"/>	<input type="text" value="\$"/>	<input type="text" value="\$"/>
Information Dissemination	Universal	<input type="text" value="\$360,465"/>	<input type="text" value="\$1,675,436"/>	<input type="text" value="\$171,194"/>	<input type="text" value="\$"/>	<input type="text" value="\$"/>
Information Dissemination	Unspecified	<input type="text" value="\$"/>	<input type="text" value="\$"/>	<input type="text" value="\$"/>	<input type="text" value="\$"/>	<input type="text" value="\$"/>
Information Dissemination	Total	\$555,297	\$1,675,436	\$239,073	\$	\$
Education	Selective	<input type="text" value="\$1,008,011"/>	<input type="text" value="\$"/>	<input type="text" value="\$9,773"/>	<input type="text" value="\$"/>	<input type="text" value="\$"/>
Education	Indicated	<input type="text" value="\$"/>	<input type="text" value="\$"/>	<input type="text" value="\$"/>	<input type="text" value="\$"/>	<input type="text" value="\$"/>
Education	Universal	<input type="text" value="\$676,345"/>	<input type="text" value="\$"/>	<input type="text" value="\$258,817"/>	<input type="text" value="\$"/>	<input type="text" value="\$"/>
Education	Unspecified	<input type="text" value="\$"/>	<input type="text" value="\$"/>	<input type="text" value="\$"/>	<input type="text" value="\$"/>	<input type="text" value="\$"/>
Education	Total	\$1,684,356	\$	\$268,590	\$	\$
Alternatives	Selective	<input type="text" value="\$390,327"/>	<input type="text" value="\$"/>	<input type="text" value="\$7,674"/>	<input type="text" value="\$"/>	<input type="text" value="\$"/>
Alternatives	Indicated	<input type="text" value="\$"/>	<input type="text" value="\$"/>	<input type="text" value="\$"/>	<input type="text" value="\$"/>	<input type="text" value="\$"/>
Alternatives	Universal	<input type="text" value="\$16,026"/>	<input type="text" value="\$"/>	<input type="text" value="\$15,260"/>	<input type="text" value="\$"/>	<input type="text" value="\$"/>
Alternatives	Unspecified	<input type="text" value="\$"/>	<input type="text" value="\$"/>	<input type="text" value="\$"/>	<input type="text" value="\$"/>	<input type="text" value="\$"/>
Alternatives	Total	\$406,353	\$	\$22,934	\$	\$
Problem Identification and Referral	Selective	<input type="text" value="\$846"/>	<input type="text" value="\$"/>	<input type="text" value="\$687"/>	<input type="text" value="\$"/>	<input type="text" value="\$"/>
Problem Identification and Referral	Indicated	<input type="text" value="\$"/>	<input type="text" value="\$"/>	<input type="text" value="\$"/>	<input type="text" value="\$"/>	<input type="text" value="\$"/>
Problem Identification and Referral	Universal	<input type="text" value="\$3,093"/>	<input type="text" value="\$"/>	<input type="text" value="\$3,002"/>	<input type="text" value="\$"/>	<input type="text" value="\$"/>
Problem Identification and Referral	Unspecified	<input type="text" value="\$"/>	<input type="text" value="\$"/>	<input type="text" value="\$"/>	<input type="text" value="\$"/>	<input type="text" value="\$"/>
Problem Identification and Referral	Total	\$3,939	\$	\$3,689	\$	\$
Community-Based Process	Selective	<input type="text" value="\$159,651"/>	<input type="text" value="\$"/>	<input type="text" value="\$104,696"/>	<input type="text" value="\$"/>	<input type="text" value="\$"/>

Community-Based Process	Indicated	\$ <input type="text"/>	\$ <input type="text"/>	\$ <input type="text"/>	\$ <input type="text"/>	\$ <input type="text"/>
Community-Based Process	Universal	\$ 1,724,962	\$ <input type="text"/>	\$ 668,444	\$ <input type="text"/>	\$ <input type="text"/>
Community-Based Process	Unspecified	\$ <input type="text"/>	\$ <input type="text"/>	\$ <input type="text"/>	\$ <input type="text"/>	\$ <input type="text"/>
Community-Based Process	Total	\$ 1,884,613	\$	\$ 773,140	\$	\$
Environmental	Selective	\$ 6,426	\$ <input type="text"/>	\$ 6,882	\$ <input type="text"/>	\$ <input type="text"/>
Environmental	Indicated	\$ <input type="text"/>	\$ <input type="text"/>	\$ <input type="text"/>	\$ <input type="text"/>	\$ <input type="text"/>
Environmental	Universal	\$ 27,867	\$ <input type="text"/>	\$ 24,339	\$ <input type="text"/>	\$ <input type="text"/>
Environmental	Unspecified	\$ <input type="text"/>	\$ <input type="text"/>	\$ <input type="text"/>	\$ <input type="text"/>	\$ <input type="text"/>
Environmental	Total	\$ 34,293	\$	\$ 31,221	\$	\$
Section 1926 Tobacco	Selective	\$ <input type="text"/>	\$ <input type="text"/>	\$ 32,117	\$ <input type="text"/>	\$ <input type="text"/>
Section 1926 Tobacco	Indicated	\$ <input type="text"/>	\$ <input type="text"/>	\$ <input type="text"/>	\$ <input type="text"/>	\$ <input type="text"/>
Section 1926 Tobacco	Universal	\$ 435	\$ <input type="text"/>	\$ 607,171	\$ <input type="text"/>	\$ <input type="text"/>
Section 1926 Tobacco	Unspecified	\$ <input type="text"/>	\$ <input type="text"/>	\$ <input type="text"/>	\$ <input type="text"/>	\$ <input type="text"/>
Section 1926 Tobacco	Total	\$ 435	\$	\$ 639,288	\$	\$
Other	Selective	\$ 28,762	\$ <input type="text"/>	\$ 21,971	\$ <input type="text"/>	\$ <input type="text"/>
Other	Indicated	\$ <input type="text"/>	\$ <input type="text"/>	\$ <input type="text"/>	\$ <input type="text"/>	\$ <input type="text"/>
Other	Universal	\$ 144,121	\$ 1,022,083	\$ 55,610	\$ <input type="text"/>	\$ <input type="text"/>
Other	Unspecified	\$ <input type="text"/>	\$ <input type="text"/>	\$ <input type="text"/>	\$ <input type="text"/>	\$ <input type="text"/>
Other	Total	\$ 172,883	\$ 1,022,083	\$ 77,581	\$	\$
Grand Total		\$ 4,742,169	\$ 2,697,519	\$ 2,055,516	\$	\$

Footnotes:

III: Expenditure Reports

Table 5b - Primary Prevention Expenditures by IOM Category

Expenditure Period Start Date: 10/1/2013 Expenditure Period End Date: 9/30/2015

Activity	SAPT Block Grant	Other Federal Funds	State Funds	Local Funds	Other
Universal Direct	\$2,515,280	\$1,448,653	\$1,454,764		
Universal Indirect	\$438,034	\$1,248,866	\$349,074		
Selective	\$1,788,855		\$251,678		
Indicated					
Column Total	\$4,742,169.00	\$2,697,519.00	\$2,055,516.00	\$0.00	\$0.00

Footnotes:

III: Expenditure Reports

Table 5c - SABG Primary Prevention Priorities and Special Population Categories

Expenditure Period Start Date: 10/1/2013 Expenditure Period End Date: 9/30/2015

Targeted Substances	
Alcohol	b
Tobacco	b
Marijuana	b
Prescription Drugs	b
Cocaine	e
Heroin	b
Inhalants	e
Methamphetamine	b
Synthetic Drugs (i.e. Bath salts, Spice, K2)	e
Targeted Populations	
Students in College	b
Military Families	e
LGBTQ	e
American Indians/Alaska Natives	e
African American	b
Hispanic	e
Homeless	e
Native Hawaiian/Other Pacific Islanders	e
Asian	e
Rural	b
Underserved Racial and Ethnic Minorities	b

Footnotes:

III: Expenditure Reports

Table 6 - Resource Development Expenditure Checklist

Expenditure Period Start Date: 10/1/2013 Expenditure Period End Date: 9/30/2015



Resource Development Expenditures Checklist						
Activity	A. Prevention-MH	B. Prevention-SA	C. Treatment-MH	D. Treatment-SA	E. Combined	F. Total
1. Planning, Coordination and Needs Assessment		\$421,481.00				\$421,481.00
2. Quality Assurance						\$0.00
3. Training (Post-Employment)						\$0.00
4. Program Development		\$579,752.00		\$8,750.00		\$588,502.00
5. Research and Evaluation		\$184,089.00				\$184,089.00
6. Information Systems						\$0.00
7. Education (Pre-Employment)						\$0.00
8. Total	\$0.00	\$1,185,322.00	\$0.00	\$8,750.00	\$0.00	\$1,194,072.00

Footnotes:





















III: Expenditure Reports

Table 7 - Statewide Entity Inventory

Expenditure Period Start Date: 10/1/2013 Expenditure Period End Date: 9/30/2015

Entity Number	I-BHS ID		Area Served (Statewide or SubState Planning Area)	Provider / Program Name	Mailing Address	City	State	Zip	SAPT Block Grant - A. Block Grant Funds (B + D + E)	SAPT Block Grant - B. Prevention (other than primary prevention) and Treatment Services	SAPT Block Grant - C. Pregnant Women and Women with Dependent Children	SAPT Block Grant - D. Primary Prevention	SAPT Block Grant - E. Early Intervention Services for HIV
1674	MO101674		Eastern	ARCA - Chesterfield	17300 North Outer 40 Road	Chesterfield	MO	63005	\$23	\$23	\$0	\$0	\$0
1674a	MO100626		Eastern	Assisted Recovery Centers of America, LLC (ARCA)	1430 Olive Street	St. Louis	MO	63103	\$824,584	\$824,584	\$0	\$0	\$0
173	MO903788		Eastern	BASIC	3026 Locust Street	St. Louis	MO	63103	\$27,962	\$27,962	\$16,325	\$0	\$0
173a	MO101558		Eastern	BASIC - Charlotte Merritts Ottley Transitional Women Center	3029 Locust Street	St. Louis	MO	63103	\$213,695	\$213,695	\$213,695	\$0	\$0
173b	MO101735		Eastern	BASIC - GP CSTAR Site (3028 Locust)	3028 Locust St	St. Louis	MO	63103	\$200,398	\$200,398	\$0	\$0	\$0
1641	X		Eastern	Big Brothers Big Sisters of Eastern Missouri	501 North Grand Blvd.	St. Louis	MO		\$64,500	\$0	\$0	\$64,500	\$0
043o	MO101452		Southwest	Burrell Behavioral Health - DOC (District 10 Office)	Parole and Probation District 10 Office	Springfield	MO		\$7,714	\$7,714	\$0	\$0	\$0
043s	MO100134		Southwest	Burrell Behavioral Health - Kimberling City	13192 State Highway 13	Kimberling City	MO	65686	\$2,010	\$2,010	\$0	\$0	\$0
043r	MO100097		Southwest	Burrell Behavioral Health - Nixa	301 E. State Highway CC	Nixa	MO	65714	\$89,950	\$89,950	\$0	\$0	\$0
043m	MO101654		Southwest	Burrell Behavioral Health - Nixa	301 E. State Highway CC	Nixa	MO		\$3,473	\$3,473	\$0	\$0	\$0
043i	MO101804		Southwest	Burrell Behavioral Health - Springfield (1931 East Cherry)	1931 East Cherry Street	Springfield	MO		\$39,082	\$39,082	\$0	\$0	\$0
043d	MO101556		Southwest	Burrell Behavioral Health - Springfield (1949 East Cherry)	1949 East Cherry Street	Springfield	MO		\$9,250	\$9,250	\$0	\$0	\$0
043l	MO101553		Southwest	Burrell Behavioral Health - Springfield (Battlefield)	1016 West Battlefield	Springfield	MO		\$54,521	\$54,521	\$0	\$0	\$0
043j	MO100065		Southwest	Burrell Behavioral Health - Springfield (E Kearney)	1441 E. Kearney St.	Springfield	MO	65803	\$7,081	\$7,081	\$0	\$0	\$0
043g	MO101495		Southwest	Burrell Behavioral Health - Springfield (East Grand)	323 East Grand Street	Springfield	MO		\$15,380	\$15,380	\$0	\$0	\$0
				Burrell									

	043n	MO750593	✖	Southwest	Behavioral Health - Springfield (S Park Ave)	800 S. Park Avenue	Springfield	MO		\$739,645	\$739,645	\$0	\$0	\$0
	043t	MO902004	✖	Southwest	Burrell Behavioral Health Care Center	1300 Bradford Pkwy	Springfield	MO		\$271,594	\$84,811	\$0	\$186,783	\$0
	318	MO301603	✖	Eastern	Center For Life Solutions, Inc.	9144 Pershall Road	Hazelwood	MO		\$750,029	\$750,029	\$0	\$0	\$0
	008	X	✖	Statewide	Central Office	1706 E Elm Street	Jefferson City	MO		\$116,607	\$642	\$0	\$115,965	\$0
	048e	MO101631	✖	Southwest	Clark CMHC - Monett	104 West main	Pierce City	MO		\$48,640	\$48,640	\$0	\$0	\$0
	048	MO101511	✖	Southwest	Clark Community Mental Health Center	104 West main	Pierce City	MO		\$5,348	\$5,348	\$0	\$0	\$0
	074c	MO100930	✖	Southwest	Community Mental Health Consultants	815 South Ash Street	Nevada	MO		\$5,826	\$5,826	\$0	\$0	\$0
	074e	MO100011	✖	Southwest	Community MHC - Butler	706 S. High Street	Butler	MO		\$620	\$620	\$0	\$0	\$0
	074a	MO103330	✖	Northwest	Community MHC - Harrisonville	306 South Independence Street	Harrisonville	MO		\$8,199	\$8,199	\$0	\$0	\$0
	1642	X	✖	Southwest	Community Partnership of the Ozarks	330 North Jefferson Avenue	Springfield	MO		\$270,678	\$0	\$0	\$270,678	\$0
	082a	MO901592	✖	Eastern	Community Treatment, Inc.	110 N. Mill Street	Festus	MO	63028	\$177,378	\$177,378	\$0	\$0	\$0
	049	MO901527	✖	Southwest	Compass Health Inc.	1800 Community Drive	Clinton	MO	64735	\$843,064	\$480,845	\$20,467	\$362,219	\$0
	058h	MO105772	✖	Northwest	Comprehensive - Independence (E. College)	416 East College	Independence	MO		\$2,634	\$2,634	\$0	\$0	\$0
	058g	MO101665	✖	Northwest	Comprehensive - Independence (Parkway Addiction Center)	17421 Medical Center Parkway	Independence	MO	64057	\$75,593	\$75,593	\$0	\$0	\$0
	058i	MO100184	✖	Northwest	Comprehensive - Independence (South Hocker Dr.)	4231 South Hocker Dr.	Independence	MO	64055	\$31,489	\$31,489	\$4,714	\$0	\$0
	058b	MO301678	✖	Northwest	Comprehensive - KC (Swope Pkwy)	5840 Swope Parkway	Kansas City	MO		\$325,435	\$325,435	\$130,822	\$0	\$0
	058a	MO100518	✖	Northwest	Comprehensive Mental Health Services	17844 East 23rd Street	Independence	MO		\$28,555	\$28,555	\$11,792	\$0	\$0
	082b	MO103009	✖	Eastern	Comtrea - Arnold	21 Municipal Drive	Arnold	MO		\$99,501	\$99,501	\$0	\$0	\$0
	082h	MO101208	✖	Eastern	Comtrea - Desoto (Serenity Acres - House A)	12800 Serenity Acres	Desoto	MO		\$7,657	\$7,657	\$0	\$0	\$0
	082f	MO101493	✖	Eastern	Comtrea - High Ridge	1817 Gravois Road	High Ridge	MO		\$22,891	\$22,891	\$0	\$0	\$0
	082e	MO101485	✖	Eastern	Comtrea - Hillsboro	351 Main Street	Hillsboro	MO		\$26,673	\$26,673	\$0	\$0	\$0
	082n	MO100095	✖	Eastern	Comtrea - Hillsboro (Bridle Ridge)	5 Bridle Ridge Spur	Hillsboro	MO		\$612	\$612	\$0	\$0	\$0
	082g	MO101487	✖	Eastern	Comtrea - Hillsboro (Gold Finch Lane)	9501 Gold Finch Lane	Hillsboro	MO		\$29,769	\$29,769	\$0	\$0	\$0
	082m	MO100083	✖	Eastern	Comtrea - Hillsboro (Hickory Plaza)	4 Hickory Ridge	Hillsboro	MO		\$783	\$783	\$0	\$0	\$0
					Curators of the									

	1206a	X		Statewide	University of Missouri-St Louis	1 University Blvd 341 Woods Hall	St. Louis	MO		\$188,000	\$0	\$0	\$188,000	\$0
	056t	MO105830		Southeast	Family Counseling Center - Ava	Douglas County Court House	Ava	MO		\$793	\$793	\$0	\$0	\$0
	056a	MO101128		Southeast	Family Counseling Center - Cape Girardeau	20 South Sprigg Street	Cape Girardeau	MO		\$243,872	\$243,872	\$240,424	\$0	\$0
	056c	MO101391		Southeast	Family Counseling Center - Caruthersville	915 Highway 84	Caruthersville	MO		\$3,569	\$3,569	\$0	\$0	\$0
	056q	MO101549		Southeast	Family Counseling Center - Charleston (Marshall)	113 Court Street	Charleston	MO		\$6,715	\$6,715	\$0	\$0	\$0
	056e	MO100620		Southeast	Family Counseling Center - Dexter	1405 Arvin Road	Dexter	MO		\$367	\$367	\$0	\$0	\$0
	056x	MO101799		Southeast	Family Counseling Center - Gainesville	107 East 3rd Street	Gainesville	MO		\$2,198	\$2,198	\$0	\$0	\$0
	056b	MO301793		Southeast	Family Counseling Center - Hayti (Stapleton Center)	501 Highway J	Hayti	MO		\$248,719	\$248,719	\$0	\$0	\$0
	056k	MO101311		Southeast	Family Counseling Center - Kennett	103 South Main Street	Kennett	MO		\$4,547	\$4,547	\$0	\$0	\$0
	056ac	MO101227		Southeast	Family Counseling Center - Kennett (Jones St)	1109 Jones Street	Kennett	MO		\$104,846	\$104,846	\$0	\$0	\$0
	056aa	MO102288		Southeast	Family Counseling Center - Kennett (Laura Dr)	1401 Laura Drive	Kennett	MO		\$17,270	\$17,270	\$0	\$0	\$0
	056y	MO101564		Southeast	Family Counseling Center - Malden	1805 N Douglass Street	Malden	MO		\$13,053	\$13,053	\$0	\$0	\$0
	056m	MO105848		Southeast	Family Counseling Center - Mountain Grove	219 E 2nd St	Mountain Grove	MO		\$1,594	\$1,594	\$0	\$0	\$0
	056o	MO101501		Southeast	Family Counseling Center - New Madrid	# 1 Courthouse Square	New Madrid	MO		\$25,480	\$25,480	\$0	\$0	\$0
	056h	MO105640		Southeast	Family Counseling Center - Poplar Bluff	3001 Warrior Lane	Poplar Bluff	MO		\$1,413	\$1,413	\$0	\$0	\$0
	056p	MO101548		Southeast	Family Counseling Center - Steele	624 North Walnut Street	Steele	MO		\$15,543	\$15,543	\$0	\$0	\$0
	056ad	MO100093		Southeast	Family Counseling Center - West Plains (3403 Division Drive)	3403 Division Drive	West Plains	MO		\$19,171	\$19,171	\$0	\$0	\$0
	056f	MO000041		Southeast	Family Counseling Center - West Plains (Division Drive)	3411 Division Drive	West Plains	MO		\$104,945	\$104,945	\$0	\$0	\$0
	056n	MO750502		Southeast	Family Counseling Center - West Plains (Lanton Road)	1015 Lanton Road	West Plains	MO		\$198,168	\$198,168	\$0	\$0	\$0
	056g	MO903598		Southeast	Family Counseling	925 State Rt VV	Kennett	MO		\$233,574	\$43,342	\$12,390	\$190,232	\$0

					Center, Inc.									
	045g	MO101532	X	Northwest	Family Guidance Center	724 North 22nd Street	St. Joseph	MO		\$9,424	\$9,424	\$0	\$0	\$0
	045d	MO902673	X	Northwest	Family Guidance Center - Cameron	101 West 3rd Street	Cameron	MO		\$48,421	\$48,421	\$0	\$0	\$0
	045c	MO902608	X	Northwest	Family Guidance Center - Maryville	109 East Summit Drive	Maryville	MO		\$72,636	\$72,636	\$0	\$0	\$0
	045a	MO105244	X	Northwest	Family Guidance Center - St Joseph (Felix)	901-909 Felix Street	St. Joseph	MO		\$131,901	\$131,901	\$0	\$0	\$0
	156b	MO101029	X	Southwest	Family Self Help Center	1809 South Connor Avenue	Joplin	MO		\$241,147	\$241,147	\$241,147	\$0	\$0
	156c	MO100287	X	Southwest	Family Self Help Center - Neosho	118 West Spring Street	Neosho	MO		\$42,244	\$42,244	\$42,244	\$0	\$0
	049au	MO100776	X	Central	FCC of MO - Boonville (East Spring)	319 Main Street	Boonville	MO		\$474	\$474	\$474	\$0	\$0
	049bb	MO100809	X	Central	FCC of MO - California	501 South Oak Street	California	MO		\$1,171	\$1,171	\$0	\$0	\$0
	049an	MO750056	X	Central	FCC of MO - Columbia (117 North Garth)	117 North Garth Ave	Columbia	MO		\$32,089	\$32,089	\$648	\$0	\$0
	049ak	MO902269	X	Central	FCC of MO - Columbia (201 N Garth - McCambridge)	201 North Garth Ave	Columbia	MO		\$198,783	\$198,783	\$198,783	\$0	\$0
	049av	MO100483	X	Central	FCC of MO - Fulton	2625 Fairway Drive	Fulton	MO		\$11,837	\$11,837	\$1,956	\$0	\$0
	049ap	MO100187	X	Central	FCC of MO - Jefferson City	204 Metro Drive, Ste B	Jefferson City	MO		\$58,975	\$58,975	\$8,609	\$0	\$0
	049bc	MO100927	X	Central	FCC of MO - Linn	106 East Main	Linn	MO		\$1,468	\$1,468	\$0	\$0	\$0
	049al	MO100179	X	Central	FCC of MO - Linn Creek	1091 Midway Drive	Linn Creek	MO		\$98,098	\$98,098	\$0	\$0	\$0
	171	X	X	Northwest	First Call Alcohol/Drug Prevention & Recovery	633 East 63rd Street	Kansas City	MO		\$265,058	\$0	\$0	\$265,058	\$0
	055ad	MO101587	X	Southeast	Gibson Recovery Center - Cape Girardeau (Ellis)	213 N Sprigg	Cape Girardeau	MO		\$40,415	\$40,415	\$0	\$0	\$0
	055a	MO903911	X	Southeast	Gibson Recovery Center - Cape Girardeau (Linden St)	1112 Linden Street	Cape Girardeau	MO		\$167,054	\$167,054	\$0	\$0	\$0
	055ai	MO101720	X	Southeast	Gibson Recovery Center - HillCrest Pointe	340 South Broadview	Cape Girardeau	MO		\$8,223	\$8,223	\$0	\$0	\$0
	055ah	MO100058	X	Eastern	Gibson Recovery Center - Marble Hill (Hwy 34)	2510 South Brentwood	St. Louis	MO		\$20,503	\$20,503	\$4,530	\$0	\$0
	055b	MO103785	X	Southeast	Gibson Recovery Center - Perryville	1418 W St Joseph St	Perryville	MO		\$12,614	\$12,614	\$0	\$0	\$0
	055c	MO104593	X	Southeast	Gibson Recovery Center - Sikeston	137 East Front Street	Sikeston	MO		\$21,761	\$21,761	\$0	\$0	\$0
	055	MO101673	X	Southeast	Gibson Recovery Center, Inc.	340 South Broadview Street	Cape Girardeau	MO		\$11,484	\$11,484	\$0	\$0	\$0

	061k	MO101793		Central	Hannibal Council - Bowling Green	1420 Business 61 South, Unit G	Bowling Green	MO		\$17,396	\$17,396	\$0	\$0	\$0
	061i	MO100718		Central	Hannibal Council - Canton	504 Lewis Street	Canton	MO		\$6,550	\$6,550	\$0	\$0	\$0
	061c	MO106101		Central	Hannibal Council - Macon	303 North Missouri Street	Macon	MO		\$24,013	\$24,013	\$0	\$0	\$0
	061a	MO101011		Central	Hannibal Council - Mexico	201 East Monroe, Suite 103	Mexico	MO		\$29,231	\$29,231	\$0	\$0	\$0
	061e	MO106671		Central	Hannibal Council - Moberly	100 East Rollins Street	Moberly	MO		\$21,759	\$21,759	\$0	\$0	\$0
	061d	MO750098		Central	Hannibal Council On Alcohol & Drug Abuse	146 Communications Drive	Hannibal	MO		\$416,405	\$416,405	\$207,245	\$0	\$0
	154u	MO100045		Northwest	HCBC - Independence	103 North Main Street	Independence	MO	64050	\$129,565	\$129,565	\$0	\$0	\$0
	154b	MO301785		Northwest	Kansas City Community Center	1730 Prospect Ave	Kansas City	MO		\$36,186	\$36,186	\$0	\$0	\$0
	154ae	MO100288		Northwest	KCCC - DOC (KCCRC)	Kansas City Community Release Center	Kansas City	MO		\$62	\$62	\$0	\$0	\$0
	154a	MO100526		Northwest	KCCC - Excelsior Springs	1205 West College	Liberty	MO		\$6,587	\$6,587	\$0	\$0	\$0
	154af	MO101067		Northwest	KCCC - KC (McGee)	1804 Wyandotte	Kansas City	MO		\$11,531	\$11,531	\$0	\$0	\$0
	154v	MO101478		Northwest	KCCC - KC (Rockhill Road)	100 W 31st St	Kansas City	MO		\$185,809	\$185,809	\$0	\$0	\$0
	154k	MO100870		Northwest	KCCC - KC (TREND - 1534 Campbell)	1534 Campbell Street	Kansas City	MO		\$804,033	\$804,033	\$0	\$0	\$0
	154y	MO101437		Northwest	KCCC - Richmond	115 West Main Street	Richmond	MO		\$406	\$406	\$0	\$0	\$0
	1655	X		Northwest	Kim Wilson Housing	730 Armstrong Ave	Kansas City	MO		\$4,167	\$4,167	\$0	\$0	\$0
	1645	X		Statewide	LEAD Institute	2502 West Ash	Columbia	MO		\$225,010	\$0	\$0	\$225,010	\$0
	1646	X		Southeast	Lincoln University	Business & Finance 306 Young Hall PO Box 29	Jefferson City	MO		\$134,331	\$0	\$0	\$134,331	\$0
	1647	X		Statewide	Missouri Alliance of Boys and Girls Clubs	1460 Bee Creek Road	Branson	MO		\$514,962	\$0	\$0	\$514,962	\$0
	1653	X		Statewide	Missouri Association of Community Task Forces	428 E. Capitol	Jefferson City	MO		\$1,117,391	\$0	\$0	\$1,117,391	\$0
	072	X		Statewide	Missouri Police Chief's Charitable Foundation	1001 East High St	Jefferson City	MO	65101	\$3,101	\$0	\$0	\$3,101	\$0
	152	X		Eastern	National Council on Alcoholism & Drug Abuse	8790 Manchester Road	Brentwood	MO		\$652,690	\$0	\$0	\$652,690	\$0
	262	MO102928		Eastern	New Beginnings Cstar	1027 S. Vandeventer	St. Louis	MO		\$4,882	\$4,882	\$0	\$0	\$0
	052j	MO100305		Southwest	Ozark Center	1105 East 32nd St.	Joplin	MO		\$16,136	\$16,136	\$0	\$0	\$0
	052b	MO100650		Southwest	Ozark Center - Joplin (Virginia St.)	305 S. Virginia Street	Joplin	MO		\$167,009	\$167,009	\$0	\$0	\$0
	052l	MO100869		Southwest	Ozark Center - Lamar	307 West 11th Street	Lamar	MO		\$2,671	\$2,671	\$0	\$0	\$0

	052a	MO103389	✖	Southwest	Ozark Center - Neosho	214 North Washington Street	Neosho	MO		\$24,013	\$24,013	\$0	\$0	\$0
	052k	MO901501	✖	Southwest	Ozark Center New Directions	3010 McClelland Blvd	Joplin	MO	64804	\$96,647	\$96,647	\$0	\$0	\$0
	638	MO100667	✖	Northwest	Paseo Clinic	1000 E. 24th Street	Kansas City	MO		\$493,901	\$493,901	\$0	\$0	\$0
	049i	MO106242	✖	Southwest	Pathways - Butler	205 East Dakota Street	Butler	MO		\$32,563	\$32,563	\$0	\$0	\$0
	049t	MO100321	✖	Central	Pathways - Camdenton	741 N Business Rt 5	Camdenton	MO		\$2,646	\$2,646	\$0	\$0	\$0
	049ae	MO101792	✖	Southwest	Pathways - Clinton (Wesmor)	109 Wesmor	Clinton	MO		\$305	\$305	\$0	\$0	\$0
	049f	MO106267	✖	Central	Pathways - Columbia	403 Dysart Street	Columbia	MO		\$43,390	\$43,390	\$0	\$0	\$0
	049w	MO103918	✖	Southwest	Pathways - El Dorado Springs	107 West Broadway Street	El Dorado Springs	MO		\$25,605	\$25,605	\$0	\$0	\$0
	049v	MO106283	✖	Central	Pathways - Eldon	206 S Mill St	Eldon	MO		\$3,969	\$3,969	\$0	\$0	\$0
	049r	MO103231	✖	Northwest	Pathways - Harrisonville	300 Galaxie Ave.	Harrisonville	MO		\$28,134	\$28,134	\$0	\$0	\$0
	049l	MO105814	✖	Central	Pathways - Lebanon	1216 Deadre Drive	Lebanon	MO		\$5,096	\$5,096	\$0	\$0	\$0
	049x	MO100865	✖	Northwest	Pathways - Lexington	819 South 13 Highway	Lexington	MO		\$10,012	\$10,012	\$0	\$0	\$0
	049a	MO106614	✖	Central	Pathways - Marshall	941 S Cherokee Drive	Marshall	MO		\$10,426	\$10,426	\$0	\$0	\$0
	049c	MO103801	✖	Southwest	Pathways - Nevada	320 North Mac Boulevard	Nevada	MO		\$37,990	\$37,990	\$0	\$0	\$0
	049o	MO103124	✖	Northwest	Pathways - Odessa	1278 W Old Hwy 40	Odessa	MO		\$21,553	\$21,553	\$0	\$0	\$0
	049ad	MO101499	✖	Southwest	Pathways - Osceola	101 Hospital Drive	Osceola	MO		\$2,548	\$2,548	\$0	\$0	\$0
	049z	MO100808	✖	Northwest	Pathways - Raymore	1010 Remington Plaza	Raymore	MO		\$44,273	\$44,273	\$0	\$0	\$0
	049b	MO106218	✖	Southeast	Pathways - Rolla	1448 E. 10th Street	Rolla	MO		\$96,139	\$96,139	\$0	\$0	\$0
	049k	MO103207	✖	Central	Pathways - Sedalia	1400 South Limit Ave	Sedalia	MO		\$69,795	\$69,795	\$329	\$0	\$0
	049q	MO901543	✖	Northwest	Pathways - Warrensburg (Burkard Rd)	520 C Burkard Road	Warrensburg	MO		\$29,879	\$29,879	\$0	\$0	\$0
	049p	MO103280	✖	Northwest	Pathways - Warrensburg (N. DeVasher)	703 North Devasher Rd	Warrensburg	MO		\$159,093	\$159,093	\$0	\$0	\$0
	049g	MO106309	✖	Southwest	Pathways - Warsaw	17571 North Dam Access	Warsaw	MO		\$31,405	\$31,405	\$0	\$0	\$0
	053a	MO102159	✖	Central	Phoenix Programs, Inc.	90 East Leslie Lane	Columbia	MO		\$860,583	\$860,583	\$0	\$0	\$0
	153ax	MO101458	✖	Eastern	Preferred - Brentwood (S Brentwood) dba Bridgeway	2510 South Brentwood	Brentwood	MO		\$128	\$128	\$0	\$0	\$0
	153m	MO103892	✖	Northwest	Preferred - Brookfield	1 Center Drive	Brookfield	MO		\$22,112	\$22,112	\$0	\$0	\$0
	153g	MO105780	✖	Central	Preferred - Hannibal	4355 Paris Gravel Road	Hannibal	MO		\$12,509	\$12,509	\$0	\$0	\$0
	153b	MO105723	✖	Central	Preferred - Jefferson City (Adams St)	101 Adams Street	Jefferson City	MO		\$211,770	\$211,770	\$0	\$0	\$0
	153q	MO100668	✖	Central	Preferred - Jefferson City (Hoover Rd.)	210 Hoover Road	Jefferson City	MO		\$414,640	\$414,640	\$0	\$0	\$0
	153ah	MO100922	✖	Southwest	Preferred - Joplin	5620 West Wildwood Ranch Parkway	Joplin	MO		\$135,023	\$135,023	\$0	\$0	\$0

	153af	MO106093	X	Central	Preferred - Kahoka	137 West Cedar Street	Kahoka	MO		\$5,021	\$5,021	\$0	\$0	\$0
	153ac	MO102019	X	Northwest	Preferred - Kansas City	8333 East Blue Parkway	Kansas City	MO		\$210,876	\$210,876	\$0	\$0	\$0
	153l	MO101169	X	Central	Preferred - Kirksville (S. Jamison)	1101 South Jamison Street	Kirksville	MO	63501	\$817,639	\$340,848	\$0	\$476,791	\$0
	153o	MO000025	X	Northwest	Preferred - Liberty	7 Westowne Street	Liberty	MO		\$124,898	\$124,898	\$0	\$0	\$0
	153ab	MO101479	X	Northwest	Preferred - Milan	109 North Main Street	Milan	MO		\$6,904	\$6,904	\$0	\$0	\$0
	153f	MO105046	X	Central	Preferred - Moberly	1715 A South Morley Street	Moberly	MO		\$49,933	\$49,933	\$0	\$0	\$0
	153aq	MO903879	X	Southwest	Preferred - Springfield (Catalpa)	2411 West Catalpa Street	Springfield	MO		\$274,078	\$274,078	\$273,277	\$0	\$0
	153ap	MO101560	X	Southwest	Preferred - Springfield (Glenstone)	1111 South Glenstone	Springfield	MO		\$6,901	\$6,901	\$6,881	\$0	\$0
	153ao	MO102252	X	Eastern	Preferred - St Louis (Newstead Ave)	4411 North Newstead Avenue, 2nd Floor	St. Louis	MO		\$122,778	\$122,778	\$0	\$0	\$0
	153e	MO105715	X	Eastern	Preferred - St. Charles	2 Westbury Drive	St. Charles	MO		\$122,110	\$122,110	\$0	\$0	\$0
	153aw	MO101136	X	Eastern	Preferred - St. Charles (Old South River Rd) dba Bridgeway	1601 Old South River Road	St. Charles	MO		\$351,787	\$351,787	\$227,654	\$0	\$0
	153av	MO100786	X	Eastern	Preferred - St. Charles (S Main St) dba Bridgeway	1570 S. Main St.	St. Charles	MO		\$70,055	\$70,055	\$24,797	\$0	\$0
	153az	MO101785	X	Eastern	Preferred - St. Charles (San Juan) dba Bridgeway	325 San Juan Drive	St. Charles	MO		\$38,596	\$38,596	\$0	\$0	\$0
	153j	MO105038	X	Northwest	Preferred - St. Joseph	1702 Buckingham Drive	St. Joseph	MO		\$59,704	\$59,704	\$0	\$0	\$0
	153ar	MO100117	X	Eastern	Preferred - St. Louis (Dunnica Ave)	4066 Dunnica Ave	St. Louis	MO		\$143,488	\$143,488	\$0	\$0	\$0
	153c	MO000024	X	Eastern	Preferred - St. Louis (Miami)	2639 Miami Street, 4th Floor	St. Louis	MO		\$12	\$12	\$0	\$0	\$0
	153w	MO100503	X	Eastern	Preferred - St. Louis (Northrup)	5025 Northrup Avenue	St. Louis	MO		\$83,200	\$83,200	\$0	\$0	\$0
	153d	MO100567	X	Eastern	Preferred - St. Louis (S. Broadway)	3800 South Broadway	St. Louis	MO		\$462,279	\$462,279	\$0	\$0	\$0
	153au	MO100765	X	Eastern	Preferred - St. Louis (Vandeventer) dba Bridgeway	1027 South Vandeventer Avenue	St. Louis	MO		\$592,948	\$592,948	\$0	\$0	\$0
	153as	MO100082	X	Eastern	Preferred - St. Peters (Parkway Dr) dba Bridgeway	2120 Parkway Drive	St. Peters	MO		\$108,803	\$108,803	\$13,107	\$0	\$0
	153ba	MO101824	X	Eastern	Preferred - Town and Country (S. Outer 40 Road) dba Bridgeway	14426 South Outer 40 Road	Town And Country	MO		\$38,077	\$38,077	\$503	\$0	\$0
	153n	MO105202	X	Northwest	Preferred - Trenton	1628 Oklahoma Ave	Trenton	MO	64683	\$175,715	\$175,715	\$0	\$0	\$0
	153al	MO101648	X	Eastern	Preferred - Troy	101 West College, Suite 1	Troy	MO		\$23,724	\$23,724	\$0	\$0	\$0
	153bc	MO106069	X	Eastern	Preferred - Troy (E Cherry) dba Bridgeway	1011 East Cherry Street	Troy	MO		\$97,160	\$97,160	\$2,762	\$0	\$0
	153am	MO101090	X	Eastern	Preferred - Union	411 East Locust Street	Union	MO		\$20,654	\$20,654	\$0	\$0	\$0

	153ay	MO101486	X	Eastern	Preferred - Union (W Main Street) dba Bridgeway	100 West Main Street	Union	MO		\$42,133	\$42,133	\$1,695	\$0	\$0
	153bb	MO102803	X	Eastern	Preferred - Warrenton (E Veterans Memorial Parkway) dba Bridgeway	1206 East Veterans Memorial Parkway	Warrenton	MO		\$49,119	\$49,119	\$0	\$0	\$0
	153an	MO101650	X	Eastern	Preferred - Wentzville	1776 Crosswinds Drive	Wentzville	MO		\$9,892	\$9,892	\$0	\$0	\$0
	153i	MO101797	X	Central	Preferred Family Healthcare, Inc.	900 East LaHarpe Street	Kirksville	MO		\$78,930	\$78,930	\$0	\$0	\$0
	1648	X	X	Southeast	Prevention Consultants	104 E. Seventh Street	Rolla	MO		\$120,264	\$0	\$0	\$120,264	\$0
	189	MO100591	X	Eastern	Queen Of Peace Center	325 N. Newstead Ave	St. Louis	MO		\$30,832	\$30,832	\$30,832	\$0	\$0
	057d	MO100864	X	Northwest	ReDiscover	901 NE Independence Avenue	Lees Summit	MO		\$11,917	\$11,917	\$11,917	\$0	\$0
	057j	MO101436	X	Northwest	ReDiscover - KC (Catherine's Place)	3720 Gillham Road	Kansas City	MO		\$41,000	\$41,000	\$41,000	\$0	\$0
	057g	MO101517	X	Northwest	ReDiscover - KC (East Armour)	301 East Armour Blvd.	Kansas City	MO		\$226,274	\$226,274	\$226,274	\$0	\$0
	057i	MO101786	X	Northwest	ReDiscover - Lee's Summit	927 NE Columbus	Lees Summit	MO		\$61,564	\$61,564	\$40,258	\$0	\$0
	057k	MO102287	X	Northwest	ReDiscover - Lees Summit (Swan Circle)	622 Swan Circle	Lees Summit	MO		\$575	\$575	\$0	\$0	\$0
	089b	MO101033	X	Eastern	Salvation Army - Harbor Light Center	1130 Hampton Avenue	St. Louis	MO		\$33,576	\$33,576	\$0	\$0	\$0
	089a	MO750403	X	Eastern	Salvation Army - Washington	3010 Washington Ave	St. Louis	MO		\$712,707	\$712,707	\$0	\$0	\$0
	183	MO100716	X	Northwest	Samuel U Rodgers Health Center	825 Euclid Avenue	Kansas City	MO		\$742,035	\$742,035	\$0	\$0	\$0
	1651	X	X	Northwest	SAVE Inc	PO Box 45301	Kansas City	MO		\$4,583	\$4,583	\$0	\$0	\$0
	158d	MO105095	X	Southeast	SEMOBH - Dexter	1526 West Business Highway 60	Dexter	MO		\$58,683	\$58,683	\$0	\$0	\$0
	158o	MO101468	X	Southeast	SEMOBH - Doniphan	104 A Washington Street	Doniphan	MO		\$8,899	\$8,899	\$0	\$0	\$0
	158c	MO902319	X	Southeast	SEMOBH - Farmington	5536 Highway 32 East	Farmington	MO		\$262,729	\$262,729	\$0	\$0	\$0
	158p	MO101451	X	Southeast	SEMOBH - Farmington (DOC District 12 Office)	Department of Corrections Community Supervision Center	Farmington	MO		\$14,148	\$14,148	\$0	\$0	\$0
	158b	MO103157	X	Southeast	SEMOBH - Houston	1597 North Hwy. 63	Houston	MO		\$9,660	\$9,660	\$0	\$0	\$0
	158t	MO101518	X	Southeast	SEMOBH - Owensville	1014 West Highway 28	Owensville	MO		\$23,158	\$23,158	\$0	\$0	\$0
	158f	MO106705	X	Southeast	SEMOBH - Park Hills (528 E Main)	528 East Main Street	Park Hills	MO		\$146	\$146	\$0	\$0	\$0
	158q	MO101469	X	Southeast	SEMOBH - Piedmont	216 Piedmont Avenue	Piedmont	MO		\$11,920	\$11,920	\$0	\$0	\$0
	158i	MO102289	X	Southeast	SEMOBH - Pilot Knob (St. Mary)	200 St. Mary St.	Pilot Knob	MO		\$9,968	\$9,968	\$0	\$0	\$0
	158r	MO101471	X	Southeast	SEMOBH - Poplar Bluff (DOC District 25 Office)	Parole and Probation District 25 Office	Poplar Bluff	MO		\$34	\$34	\$0	\$0	\$0
	158a	MO000022	X	Southeast	SEMOBH - Poplar Bluff (S Main)	101 South Main Street	Poplar Bluff	MO		\$296,298	\$296,298	\$0	\$0	\$0

158h	MO000021	X	Southeast	SEMOBH - Poplar Bluff (Warrior Lane)	3150 Warrior Lane	Poplar Bluff	MO		\$26,325	\$26,325	\$0	\$0	\$0
158e	MO102571	X	Southeast	SEMOBH - Potosi	10071 Crescent Road	Potosi	MO		\$16,435	\$16,435	\$0	\$0	\$0
158z	MO100006	X	Southeast	SEMOBH - Potosi (Southtowne Dr)	1 Southtowne Drive	Potosi	MO		\$20,252	\$20,252	\$0	\$0	\$0
158k	MO103140	X	Southeast	SEMOBH - Rolla	1051 Kingshighway	Rolla	MO		\$38,984	\$38,984	\$0	\$0	\$0
158g	MO903853	X	Southeast	SEMOBH - Salem (203 N Grand)	203 North Grand Street	Salem	MO		\$200,365	\$200,365	\$0	\$0	\$0
158j	MO103165	X	Southeast	SEMOBH - Steelville	502 Pine Street	Steelville	MO		\$35,845	\$35,845	\$0	\$0	\$0
158s	MO101470	X	Southeast	SEMOBH - Van Buren	401 North Main Street	Van Buren	MO		\$10,695	\$10,695	\$0	\$0	\$0
043k	MO100849	X	Southwest	Sigma House - Larry Simmering Recovery Center	360 Rinehart Road	Branson	MO		\$544,027	\$544,027	\$0	\$0	\$0
158m	MO903259	X	Southeast	Southeast Missouri Behavioral Health, Inc.	512 East Main	Park Hills	MO		\$60,508	\$0	\$0	\$60,508	\$0
1694	X	X	Southeast	Southeast Missouri State University	One University Plaza	Cape Girardeau	MO		\$94,771	\$0	\$0	\$94,771	\$0
087a	MO106598	X	Northwest	Swope Health Services	3950 E 51st Street	Kansas City	MO		\$47,626	\$47,626	\$0	\$0	\$0
087b	MO903127	X	Northwest	Swope Health Services - Kansas City (51st St)	3801 Blue Parkway	Kansas City	MO		\$415,148	\$415,148	\$0	\$0	\$0
185	MO105152	X	Northwest	Tri-County Mental Health Services	Tri-County - Liberty (531 N Gallatin)	Liberty	MO		\$112,162	\$0	\$0	\$112,162	\$0
1650	X	X	Southwest	United Way of the Ozarks	320 North Jefferson	320 North Jefferson	MO		\$302,926	\$0	\$0	\$302,926	\$0
407	X	X	Statewide	University of MO - Columbia	Sponsored Programs Admin 310	Columbia	MO		\$469,148	\$0	\$0	\$469,148	\$0
269	MO105087	X	Eastern	Westend Clinic	5736 West Florissant Ave	St. Louis	MO		\$788,842	\$788,842	\$0	\$0	\$0
Total									\$25,888,933	\$19,961,443	\$2,257,551	\$5,927,490	\$0

* Indicates the imported record has an error.

Footnotes:

The sum of Table 4, row 1 (19,758,684) plus Table 4, row 4 (1,111) is equal to Table 7, column B (\$

III: Expenditure Reports

Table 8a - Maintenance of Effort for State Expenditures for SAPT

Did the State or Jurisdiction have any non-recurring expenditures for a specific purpose which were not included in the MOE calculation?

Yes ☐ No ☒

If yes, specify the amount and the State fiscal year: _____

If yes, SFY: _____

Did the State or Jurisdiction include these funds in previous year MOE calculations?

Yes ☐ No ☐

When did the State submit an official request to the SAMHSA Administrator to exclude these funds from the MOE calculations? _____

Total Single State Agency (SSA) Expenditures for Substance Abuse Prevention and Treatment		
Period (A)	Expenditures (B)	<u>B1(2014) + B2(2015)</u> 2 (C)
SFY 2014 (1)	\$57,225,305	
SFY 2015 (2)	\$58,177,400	\$57,701,353
SFY 2016 (3)	\$59,073,806	

Are the expenditure amounts reported in Column B "actual" expenditures for the State fiscal years involved?

SFY 2014	Yes	<input checked="" type="checkbox"/>	No	<input type="checkbox"/>
SFY 2015	Yes	<input checked="" type="checkbox"/>	No	<input type="checkbox"/>
SFY 2016	Yes	<input checked="" type="checkbox"/>	No	<input type="checkbox"/>

If estimated expenditures are provided, please indicate when actual expenditure data will be submitted to SAMHSA: _____

Please provide a description of the amounts and methods used to calculate the total Single State Agency (SSA) expenditures for substance abuse prevention and treatment 42 U.S.C. §300x-30

The SAPT Block Grant MOE is an average of the two prior year's state expenditures. State expenditures are tracked in the SAMH Accounting system by appropriation and project code when applicable.

Footnotes:

Total State Expenditures equal \$44,431,083 plus the state portion of Medicaid Match \$15,046,540 for a total state expenditures of \$59,477,623.

III: Expenditure Reports

Table 8b - Base and Maintenance of Effort for State Expenditures for TB

State Expenditures for Tuberculosis Services to Individuals in Substance Use Disorder Treatment BASE				
Period	Total of All State Funds Spent on TB Services	% of TB Expenditures Spent on Individuals in Substance Use Disorder Treatment	Total State Funds Spent on Individuals in Substance Use Disorders Treatment (A x B)	Average of Column C1 and C2 $\frac{C1+C2}{2}$ (MOE BASE)
(A)	(B)	(C)	(D)	
SFY 1991 (1)	\$421,670	0.06%	\$253	
SFY 1992 (2)	\$455,117	0.50%	\$2,276	\$1,264

State Expenditures for Tuberculosis Services to Individuals in Substance Use Disorder Treatment MAINTENANCE			
Period	Total of All State Funds Spent on TB Services	% of TB Expenditures Spent on Individuals in Substance Use Disorder Treatment	Total State Funds Spent on Individuals in Substance Use Disorders Treatment (A x B)
(A)	(B)	(C)	
SFY 2016 (3)	\$114,523	8.02%	\$9,185

Please provide a description of the amounts and methods used to calculate the base and Maintenance of Effort (MOE) for tuberculosis services as required by 42 U.S.C. §300x-24(d)

Amount is actual expenditures from the Departments of Mental Health (DMH), Corrections, Social Services, and Health and Senior Services.

The methodology is the same as that of the prior year. The Department of Corrections provides aggregated costs of TB services to inmates in correctional facilities, and associated costs to those inmates in institutional substance abuse treatment programs. The Department of Health and Senior Services provides aggregated non-federal costs of the number of clients treated for TB at local health departments. In addition, non-federal cost of the TB tests performed at local health departments is computed for clients referred from DMH-funded substance use treatment programs. The Department of Social Services provides statewide expenditures for claims with TB diagnosis codes per the Missouri Medicaid Management Information System. State Medicaid expenditures for TB treatment provided by DMH-funded substance use treatment programs represent the proportion of expenditures that were spent on substance users. The final component of TB cost

determination is from the DMH information system which captures services delivered to consumers by service code. The payments for these non-Medicaid TB services were summed and segregated by funding source (Non-Federal or State Funds.)

Footnotes:

III: Expenditure Reports

Table 8c - Base and Maintenance of Effort for Expenditures for HIV Early Intervention Services

Enter the year in which your State last became a designated State, Federal Fiscal Year . Enter the 2 prior years' expenditure data in A1 and A2. Compute the average of the amounts in boxes A1 and A2. Enter the resulting average (MOE Base) in box B2.

State Expenditures for HIV Early Intervention Services to Individuals in Substance Use Disorder Treatment BASE		
Period	Total of All State Funds Spent on Early Intervention Services for HIV (A)	Average of Columns A1 and A2 $\frac{A1+A2}{2}$ (MOE Base) (B)
(1) SFY <u>1991</u>	\$0	
(2) SFY <u>1992</u>	\$0	\$0

Statewide Non-Federal Expenditures for HIV Early Intervention Services to Individuals in Substance Use Disorder Treatment MAINTENANCE		
Period	Total of All State Funds Spent on Early Intervention Services for HIV (A)	
(3) SFY 2016		\$0

Please provide a description of the amounts and methods used to calculate (for designated states only) the base and MOE for HIV early intervention services as required by 42 U.S.C. §300x-24(d) (See 45 C.F.R. §96.122(f)(5)(ii)(A)(B)(C))

Footnotes:

Missouri is not an HIV designated state.

III: Expenditure Reports

Table 8d - Expenditures for Services to Pregnant Women and Women with Dependent Children

Expenditures for Services to Pregnant Women and Women with Dependent Children		
Period	Total Women's Base (A)	Total Expenditures (B)
SFY 1994	\$7,728,020	
SFY 2014		\$9,720,572
SFY 2015		\$9,808,612
SFY 2016		\$10,713,048
Enter the amount the State plans to expend in 2017 for services for pregnant women and women with dependent children (amount entered must be not less than amount entered in Table IV Maintenance - Box A (1994)): \$ <u>10713048.00</u>		

Please provide a description of the amounts and methods used to calculate the base and, for 1994 and subsequent fiscal years, report the Federal and State expenditures for such services for services to pregnant women and women with dependent children as required by 42 U.S.C. §300x-22(b)(1).

The Division used the following method to calculate the amounts for the base and subsequent years for services to pregnant women and women with dependent children. The Department of Mental Health Customer Information Management, Outcomes and Reporting system captures services delivered to clients by service code. For the base year 1992, all payments for services to women at programs meeting the requirements of Section 1922(c) and Section 96.124 (e) were summed and segregated by funding source (Federal Block Grant and Non-Federal or State Funds).

Footnotes:

IV: Populations and Services Reports

Table 9 - Prevention Strategy Report

Expenditure Period Start Date: 10/1/2013 Expenditure Period End Date: 9/30/2015

Column A (Risks)	Column B (Strategies)	Column C (Providers)
Children of substance abusers	1. Information Dissemination	
	1. Clearinghouse/information resources centers	13
	2. Resources directories	13
	4. Brochures	23
	7. Health fairs and other health promotion, e.g., conferences, meetings, seminars	14
	8. Information lines/Hot lines	1
	2. Education	
	1. Parenting and family management	3
	3. Alternatives	
	6. Recreation activities	12
	4. Problem Identification and Referral	
	4. School Screenings	4
	5. Community-Based Process	
	1. Community and volunteer training, e.g., neighborhood action training, impactor-training, staff/officials training	18
	2. Systematic planning	12
	3. Multi-agency coordination and collaboration/coalition	13
	4. Community team-building	12
	5. Accessing services and funding	12
	6. Environmental	
	1. Promoting the establishment or review of alcohol, tobacco, and drug use policies in schools	11
	2. Guidance and technical assistance on monitoring enforcement governing availability and distribution of alcohol, tobacco, and other drugs	12
Pregnant women/teens	1. Information Dissemination	
	1. Clearinghouse/information resources centers	13
	2. Resources directories	13

	4. Brochures	23
	7. Health fairs and other health promotion, e.g., conferences, meetings, seminars	14
	8. Information lines/Hot lines	1
	3. Alternatives	
	6. Recreation activities	12
	4. Problem Identification and Referral	
	4. School Screenings	4
	5. Community-Based Process	
	1. Community and volunteer training, e.g., neighborhood action training, impactor-training, staff/officials training	18
	2. Systematic planning	12
	3. Multi-agency coordination and collaboration/coalition	13
	4. Community team-building	12
	5. Accessing services and funding	12
Drop-outs	1. Information Dissemination	
	1. Clearinghouse/information resources centers	13
	2. Resources directories	13
	4. Brochures	23
	7. Health fairs and other health promotion, e.g., conferences, meetings, seminars	14
	8. Information lines/Hot lines	1
	3. Alternatives	
	6. Recreation activities	12
	5. Community-Based Process	
	1. Community and volunteer training, e.g., neighborhood action training, impactor-training, staff/officials training	18
	2. Systematic planning	12
	3. Multi-agency coordination and collaboration/coalition	13
	4. Community team-building	12
	5. Accessing services and funding	12
Violent and delinquent behavior	1. Information Dissemination	
	1. Clearinghouse/information resources centers	13
	2. Resources directories	12
	4. Brochures	23

	7. Health fairs and other health promotion, e.g., conferences, meetings, seminars	14
	8. Information lines/Hot lines	1
	2. Education	
	4. Education programs for youth groups	18
	3. Alternatives	
	6. Recreation activities	12
	4. Problem Identification and Referral	
	4. School Screenings	4
	5. Community-Based Process	
	1. Community and volunteer training, e.g., neighborhood action training, impactor-training, staff/officials training	18
	2. Systematic planning	12
	3. Multi-agency coordination and collaboration/coalition	13
	4. Community team-building	12
	5. Accessing services and funding	12
	6. Environmental	
	1. Promoting the establishment or review of alcohol, tobacco, and drug use policies in schools	11
	2. Guidance and technical assistance on monitoring enforcement governing availability and distribution of alcohol, tobacco, and other drugs	12
Mental health problems	1. Information Dissemination	
	1. Clearinghouse/information resources centers	13
	2. Resources directories	13
	4. Brochures	23
	7. Health fairs and other health promotion, e.g., conferences, meetings, seminars	14
	8. Information lines/Hot lines	1
	2. Education	
	1. Parenting and family management	3
	3. Alternatives	
	6. Recreation activities	12
	4. Problem Identification and Referral	
	4. School Screenings	4

Economically disadvantaged	5. Community-Based Process	
	1. Community and volunteer training, e.g., neighborhood action training, impactor-training, staff/officials training	18
	2. Systematic planning	12
	3. Multi-agency coordination and collaboration/coalition	13
	4. Community team-building	12
	5. Accessing services and funding	12
	6. Environmental	
	1. Promoting the establishment or review of alcohol, tobacco, and drug use policies in schools	11
	2. Guidance and technical assistance on monitoring enforcement governing availability and distribution of alcohol, tobacco, and other drugs	12
	1. Information Dissemination	
	1. Clearinghouse/information resources centers	13
	2. Resources directories	13
	4. Brochures	23
	7. Health fairs and other health promotion, e.g., conferences, meetings, seminars	14
	8. Information lines/Hot lines	1
	2. Education	
	1. Parenting and family management	3
	2. Ongoing classroom and/or small group sessions	8
	5. Mentors	3
	3. Alternatives	
	2. Youth/adult leadership activities	5
	6. Recreation activities	12
	4. Problem Identification and Referral	
	4. School Screenings	4
	5. Community-Based Process	
	1. Community and volunteer training, e.g., neighborhood action training, impactor-training, staff/officials training	18
	2. Systematic planning	12
	3. Multi-agency coordination and collaboration/coalition	13
	4. Community team-building	12

Physically disabled	5. Accessing services and funding	12
	6. Environmental	
	1. Promoting the establishment or review of alcohol, tobacco, and drug use policies in schools	11
	2. Guidance and technical assistance on monitoring enforcement governing availability and distribution of alcohol, tobacco, and other drugs	12
	1. Information Dissemination	
	1. Clearinghouse/information resources centers	13
	2. Resources directories	13
	4. Brochures	23
	8. Information lines/Hot lines	1
	3. Alternatives	
	6. Recreation activities	12
	4. Problem Identification and Referral	
	4. School Screenings	4
	5. Community-Based Process	
	1. Community and volunteer training, e.g., neighborhood action training, impactor-training, staff/officials training	18
	2. Systematic planning	12
	3. Multi-agency coordination and collaboration/coalition	13
	4. Community team-building	12
	5. Accessing services and funding	12
Abuse victims	1. Information Dissemination	
	1. Clearinghouse/information resources centers	13
	2. Resources directories	13
	4. Brochures	23
	8. Information lines/Hot lines	1
	3. Alternatives	
	6. Recreation activities	12
	4. Problem Identification and Referral	
	4. School Screenings	4
	5. Community-Based Process	
	1. Community and volunteer training, e.g., neighborhood action training, impactor-	18

	training, staff/officials training	
	2. Systematic planning	12
	3. Multi-agency coordination and collaboration/coalition	13
	4. Community team-building	12
	5. Accessing services and funding	12
Already using substances	1. Information Dissemination	
	1. Clearinghouse/information resources centers	13
	2. Resources directories	13
	4. Brochures	23
	8. Information lines/Hot lines	1
	3. Alternatives	
	6. Recreation activities	12
	4. Problem Identification and Referral	
	4. School Screenings	4
	5. Community-Based Process	
	1. Community and volunteer training, e.g., neighborhood action training, impactor-training, staff/officials training	18
	2. Systematic planning	12
	3. Multi-agency coordination and collaboration/coalition	13
	4. Community team-building	12
	5. Accessing services and funding	12
Homeless and/or runaway youth	1. Information Dissemination	
	1. Clearinghouse/information resources centers	13
	2. Resources directories	13
	4. Brochures	23
	7. Health fairs and other health promotion, e.g., conferences, meetings, seminars	14
	8. Information lines/Hot lines	1
	3. Alternatives	
	6. Recreation activities	12
	4. Problem Identification and Referral	
	4. School Screenings	4
	5. Community-Based Process	
	3. Multi-agency coordination and collaboration/coalition	13

Footnotes:

IV: Populations and Services Reports

Table 10 - Treatment Utilization Matrix

Expenditure Period Start Date: 7/1/2015 Expenditure Period End Date: 6/30/2016

Level of Care	Number of Admissions \geq Number of Persons Served		Costs per Person		
	Number of Admissions (A)	Number of Persons Served (B)	Mean Cost of Services (C)	Median Cost of Services (D)	Standard Deviation of Cost (E)
DETOXIFICATION (24-HOUR CARE)					
1. Hospital Inpatient	267	231	\$1,450	\$1,397	\$857
2. Free-Standing Residential	6509	5260	\$995	\$422	\$1,205
REHABILITATION/RESIDENTIAL					
3. Hospital Inpatient	0	0	\$0	\$0	\$0
4. Short-term (up to 30 days)	9407	8264	\$4,307	\$3,015	\$4,778
5. Long-term (over 30 days)	0	0	\$0	\$0	\$0
AMBULATORY (OUTPATIENT)					
6. Outpatient	13012	12059	\$940	\$695	\$1,097
7. Intensive Outpatient	18985	16571	\$1,676	\$953	\$2,078
8. Detoxification	0	0	\$0	\$0	\$0
OPIOID REPLACEMENT THERAPY					
9. Opioid Replacement Therapy	875	775	\$1,685	\$1,671	\$953
10. ORT Outpatient	0	0	\$0	\$0	\$0

Footnotes:

IV: Populations and Services Reports

Table 11 - Unduplicated Count of Persons

Expenditure Period Start Date: 7/1/2015 Expenditure Period End Date: 6/30/2016

Age	A. Total	B. WHITE		C. BLACK OR AFRICAN AMERICAN		D. NATIVE HAWAIIAN / OTHER PACIFIC ISLANDER		E. ASIAN		F. AMERICAN INDIAN / ALASKA NATIVE		G. MORE THAN ONE RACE REPORTED		H. Unknown		I. NOT HISPANIC OR LATINO		J. HISPANIC OR LATINO	
		Male	Female	Male	Female	Male	Female	Male	Female	Male	Female	Male	Female	Male	Female	Male	Female	Male	Female
1. 17 and Under	1894	890	508	226	52	1	0	1	3	6	1	78	43	61	24	1189	603	74	28
2. 18 - 24	4161	1843	1465	429	164	2	0	5	3	8	2	93	70	52	25	2361	1673	71	56
3. 25 - 44	16678	7516	5518	2095	828	10	5	15	8	15	10	249	203	154	52	9829	6504	225	120
4. 45 - 64	6559	3244	1396	1321	369	1	1	4	5	14	5	95	38	55	11	4650	1803	84	22
5. 65 and Over	214	117	21	63	8	0	0	0	0	0	0	3	0	2	0	183	29	2	0
6. Total	29506	13610	8908	4134	1421	14	6	25	19	43	18	518	354	324	112	18212	10612	456	226
7. Pregnant Women	692		528		127		1		0		0		29		7		675		17
Number of persons served who were admitted in a period prior to the 12 month reporting period	10520																		
Number of persons served outside of the levels of care described on Table 10	7186																		

Footnotes:
Six consumers reported a gender other than male or female.

IV: Populations and Services Reports

Table 12 - HIV Designated States Early Intervention Services

Expenditure Period Start Date: 7/1/2015 Expenditure Period End Date: 6/30/2016

Early Intervention Services for Human Immunodeficiency Virus (HIV)		
1. Number of SAPT HIV EIS programs funded in the State	Statewide: _____	Rural: _____
2. Total number of individuals tested through SAPT HIV EIS funded programs		
3. Total number of HIV tests conducted with SAPT HIV EIS funds		
4. Total number of tests that were positive for HIV		
5. Total number of individuals who prior to the 12-month reporting period were unaware of their HIV infection		
6. Total number of HIV-infected individuals who were diagnosed and referred into treatment and care during the 12-month reporting period		
Identify barriers, including State laws and regulations, that exist in carrying out HIV testing services:		
<p>Footnotes:</p> <p>Missouri is not an HIV designated state.</p>		

IV: Populations and Services Reports

Table 13 - Charitable Choice

Expenditure Period Start Date: 7/1/2015 Expenditure Period End Date: 6/30/2016

Notice to Program Beneficiaries - Check all that apply:

- ☐ Used model notice provided in final regulation.
- ☐ Used notice developed by State (please attach a copy to the Report).
- ☐ State has disseminated notice to religious organizations that are providers.
- ☐ State requires these religious organizations to give notice to all potential beneficiaries.

Referrals to Alternative Services - Check all that apply:

- ☐ State has developed specific referral system for this requirement.
- ☐ State has incorporated this requirement into existing referral system(s).
- ☐ SAMHSA's Treatment Facility Locator is used to help identify providers.
- ☐ Other networks and information systems are used to help identify providers.
- ☐ State maintains record of referrals made by religious organizations that are providers.
- ☐ 0 Enter total number of referrals necessitated by religious objection to other substance abuse providers ("alternative providers"), as defined above, made in previous fiscal year. Provide total only; no information on specific referrals required.

Brief description (one paragraph) of any training for local governments and faith-based and community organizations on these requirements.

The Access to Recovery (ATR) IV grant supports a voucher-based program, of which consumer choice is fundamental. Each consumer served can choose between at least two service providers, to which at least one they have no religious objection. That basic premise is repeated in all ATR policies and trainings. GPRA trainings and regional ATR trainings and meetings all reinforce consumer choice as a core aspect of ATR. Additionally, a free-choice statement is printed on every ATR voucher.

Footnotes:

V: Performance Indicators and Accomplishments

Table 14 - Treatment Performance Measure Employment/Education Status (From Admission to Discharge)

Short-term Residential(SR)

Employment/Education Status – Clients employed or student (full-time and part-time) (prior 30 days) at admission vs. discharge

	At Admission(T1)	At Discharge(T2)
Number of clients employed or student (full-time and part-time) [numerator]	1,822	1,777
Total number of clients with non-missing values on employment/student status [denominator]	7,507	7,507
Percent of clients employed or student (full-time and part-time)	24.3 %	23.7 %
Notes (for this level of care):		
Number of CY 2015 admissions submitted:		4,762
Number of CY 2015 discharges submitted:		8,271
Number of CY 2015 discharges linked to an admission:		8,269
Number of linked discharges after exclusions (excludes: detox, hospital inpatient, opioid replacement clients; deaths; incarcerated):		8,122
Number of CY 2015 linked discharges eligible for this calculation (non-missing values):		7,507

Source: SAMHSA/CBHSQ TEDS CY 2015 admissions file and CY 2015 linked discharge file
[Records received through 5/3/2016]

Long-term Residential(LR)

Employment/Education Status – Clients employed or student (full-time and part-time) (prior 30 days) at admission vs. discharge

	At Admission(T1)	At Discharge(T2)
Number of clients employed or student (full-time and part-time) [numerator]	0	0
Total number of clients with non-missing values on employment/student status [denominator]	0	0
Percent of clients employed or student (full-time and part-time)	0.0 %	0.0 %
Notes (for this level of care):		
Number of CY 2015 admissions submitted:		0
Number of CY 2015 discharges submitted:		0
Number of CY 2015 discharges linked to an admission:		0

Number of linked discharges after exclusions (excludes: detox, hospital inpatient, opioid replacement clients; deaths; incarcerated):	0
Number of CY 2015 linked discharges eligible for this calculation (non-missing values):	0

Source: SAMHSA/CBHSQ TEDS CY 2015 admissions file and CY 2015 linked discharge file
[Records received through 5/3/2016]

Outpatient (OP)

Employment/Education Status – Clients employed or student (full-time and part-time) (prior 30 days) at admission vs. discharge

	At Admission(T1)	At Discharge(T2)
Number of clients employed or student (full-time and part-time) [numerator]	3,667	4,116
Total number of clients with non-missing values on employment/student status [denominator]	7,489	7,489
Percent of clients employed or student (full-time and part-time)	49.0 %	55.0 %
Notes (for this level of care):		
Number of CY 2015 admissions submitted:		8,680
Number of CY 2015 discharges submitted:		12,569
Number of CY 2015 discharges linked to an admission:		10,156
Number of linked discharges after exclusions (excludes: detox, hospital inpatient, opioid replacement clients; deaths; incarcerated):		9,171
Number of CY 2015 linked discharges eligible for this calculation (non-missing values):		7,489

Source: SAMHSA/CBHSQ TEDS CY 2015 admissions file and CY 2015 linked discharge file
[Records received through 5/3/2016]

Intensive Outpatient (IO)

Employment/Education Status – Clients employed or student (full-time and part-time) (prior 30 days) at admission vs. discharge

	At Admission(T1)	At Discharge(T2)
Number of clients employed or student (full-time and part-time) [numerator]	5,284	5,698
Total number of clients with non-missing values on employment/student status [denominator]	16,664	16,664
Percent of clients employed or student (full-time and part-time)	31.7 %	34.2 %
Notes (for this level of care):		
Number of CY 2015 admissions submitted:		15,222
Number of CY 2015 discharges submitted:		22,729
Number of CY 2015 discharges linked to an admission:		21,641

Number of linked discharges after exclusions (excludes: detox, hospital inpatient, opioid replacement clients; deaths; incarcerated):	20,633
Number of CY 2015 linked discharges eligible for this calculation (non-missing values):	16,664

Source: SAMHSA/CBHSQ TEDS CY 2015 admissions file and CY 2015 linked discharge file
[Records received through 5/3/2016]

Footnotes:

Missouri does not have long-term residential treatment.

V: Performance Indicators and Accomplishments

Table 15 - Treatment Performance Measure Stability of Housing (From Admission to Discharge)

Short-term Residential(SR)

Stability of Housing – Clients reporting being in a stable living situation (prior 30 days) at admission vs. discharge

	At Admission(T1)	At Discharge(T2)
Number of clients in a stable living situation [numerator]	6,219	6,343
Total number of clients with non-missing values on living arrangements [denominator]	7,126	7,126
Percent of clients in stable living situation	87.3 %	89.0 %
Notes (for this level of care):		
Number of CY 2015 admissions submitted:		4,762
Number of CY 2015 discharges submitted:		8,271
Number of CY 2015 discharges linked to an admission:		8,269
Number of linked discharges after exclusions (excludes: detox, hospital inpatient, opioid replacement clients; deaths; incarcerated):		8,122
Number of CY 2015 linked discharges eligible for this calculation (non-missing values):		7,126

Source: SAMHSA/CBHSQ TEDS CY 2015 admissions file and CY 2015 linked discharge file
[Records received through 5/3/2016]

Long-term Residential(LR)

Stability of Housing – Clients reporting being in a stable living situation (prior 30 days) at admission vs. discharge

	At Admission(T1)	At Discharge(T2)
Number of clients in a stable living situation [numerator]	0	0
Total number of clients with non-missing values on living arrangements [denominator]	0	0
Percent of clients in stable living situation	0.0 %	0.0 %
Notes (for this level of care):		
Number of CY 2015 admissions submitted:		0
Number of CY 2015 discharges submitted:		0
Number of CY 2015 discharges linked to an admission:		0

Number of linked discharges after exclusions (excludes: detox, hospital inpatient, opioid replacement clients; deaths; incarcerated):	0
Number of CY 2015 linked discharges eligible for this calculation (non-missing values):	0

Source: SAMHSA/CBHSQ TEDS CY 2015 admissions file and CY 2015 linked discharge file
[Records received through 5/3/2016]

Outpatient (OP)

Stability of Housing – Clients reporting being in a stable living situation (prior 30 days) at admission vs. discharge

	At Admission(T1)	At Discharge(T2)
Number of clients in a stable living situation [numerator]	7,185	7,192
Total number of clients with non-missing values on living arrangements [denominator]	7,266	7,266
Percent of clients in stable living situation	98.9 %	99.0 %
Notes (for this level of care):		
Number of CY 2015 admissions submitted:		8,680
Number of CY 2015 discharges submitted:		12,569
Number of CY 2015 discharges linked to an admission:		10,156
Number of linked discharges after exclusions (excludes: detox, hospital inpatient, opioid replacement clients; deaths; incarcerated):		9,171
Number of CY 2015 linked discharges eligible for this calculation (non-missing values):		7,266

Source: SAMHSA/CBHSQ TEDS CY 2015 admissions file and CY 2015 linked discharge file
[Records received through 5/3/2016]

Intensive Outpatient (IO)

Stability of Housing – Clients reporting being in a stable living situation (prior 30 days) at admission vs. discharge

	At Admission(T1)	At Discharge(T2)
Number of clients in a stable living situation [numerator]	14,967	15,048
Total number of clients with non-missing values on living arrangements [denominator]	15,804	15,804
Percent of clients in stable living situation	94.7 %	95.2 %
Notes (for this level of care):		
Number of CY 2015 admissions submitted:		15,222
Number of CY 2015 discharges submitted:		22,729
Number of CY 2015 discharges linked to an admission:		21,641

Number of linked discharges after exclusions (excludes: detox, hospital inpatient, opioid replacement clients; deaths; incarcerated):	20,633
Number of CY 2015 linked discharges eligible for this calculation (non-missing values):	15,804

Source: SAMHSA/CBHSQ TEDS CY 2015 admissions file and CY 2015 linked discharge file
[Records received through 5/3/2016]

Footnotes:

Missouri does not have long-term residential treatment.

V: Performance Indicators and Accomplishments

Table 16 - Treatment Performance Measure Criminal Justice Involvement (From Admission to Discharge)

Short-term Residential(SR)

Clients without arrests (any charge) (prior 30 days) at admission vs. discharge

	At Admission(T1)	At Discharge(T2)
Number of Clients without arrests [numerator]	6,437	6,714
Total number of Admission and Discharge clients with non-missing values on arrests [denominator]	7,495	7,495
Percent of clients without arrests	85.9 %	89.6 %
Notes (for this level of care):		
Number of CY 2015 admissions submitted:		4,762
Number of CY 2015 discharges submitted:		8,271
Number of CY 2015 discharges linked to an admission:		8,269
Number of linked discharges after exclusions (excludes: detox, hospital inpatient, opioid replacement clients; deaths; incarcerated):		8,161
Number of CY 2015 linked discharges eligible for this calculation (non-missing values):		7,495

Source: SAMHSA/CBHSQ TEDS CY 2015 admissions file and CY 2015 linked discharge file
[Records received through 5/3/2016]

Long-term Residential(LR)

Clients without arrests (any charge) (prior 30 days) at admission vs. discharge

	At Admission(T1)	At Discharge(T2)
Number of Clients without arrests [numerator]	0	0
Total number of Admission and Discharge clients with non-missing values on arrests [denominator]	0	0
Percent of clients without arrests	0.0 %	0.0 %
Notes (for this level of care):		
Number of CY 2015 admissions submitted:		0
Number of CY 2015 discharges submitted:		0
Number of CY 2015 discharges linked to an admission:		0

Number of linked discharges after exclusions (excludes: detox, hospital inpatient, opioid replacement clients; deaths; incarcerated):	0
Number of CY 2015 linked discharges eligible for this calculation (non-missing values):	0

Source: SAMHSA/CBHSQ TEDS CY 2015 admissions file and CY 2015 linked discharge file
[Records received through 5/3/2016]

Outpatient (OP)

Clients without arrests (any charge) (prior 30 days) at admission vs. discharge

	At Admission(T1)	At Discharge(T2)
Number of Clients without arrests [numerator]	7,317	7,194
Total number of Admission and Discharge clients with non-missing values on arrests [denominator]	7,569	7,569
Percent of clients without arrests	96.7 %	95.0 %
Notes (for this level of care):		
Number of CY 2015 admissions submitted:		8,680
Number of CY 2015 discharges submitted:		12,569
Number of CY 2015 discharges linked to an admission:		10,156
Number of linked discharges after exclusions (excludes: detox, hospital inpatient, opioid replacement clients; deaths; incarcerated):		9,444
Number of CY 2015 linked discharges eligible for this calculation (non-missing values):		7,569

Source: SAMHSA/CBHSQ TEDS CY 2015 admissions file and CY 2015 linked discharge file
[Records received through 5/3/2016]

Intensive Outpatient (IO)

Clients without arrests (any charge) (prior 30 days) at admission vs. discharge

	At Admission(T1)	At Discharge(T2)
Number of Clients without arrests [numerator]	15,372	15,308
Total number of Admission and Discharge clients with non-missing values on arrests [denominator]	16,584	16,584
Percent of clients without arrests	92.7 %	92.3 %
Notes (for this level of care):		
Number of CY 2015 admissions submitted:		15,222
Number of CY 2015 discharges submitted:		22,729
Number of CY 2015 discharges linked to an admission:		21,641

Number of linked discharges after exclusions (excludes: detox, hospital inpatient, opioid replacement clients; deaths; incarcerated):	21,273
Number of CY 2015 linked discharges eligible for this calculation (non-missing values):	16,584

Source: SAMHSA/CBHSQ TEDS CY 2015 admissions file and CY 2015 linked discharge file
[Records received through 5/3/2016]

Footnotes:

Missouri does not have long-term residential treatment.

V: Performance Indicators and Accomplishments

Table 17 - Treatment Performance Measure Change in Abstinence - Alcohol Use (From Admission to Discharge)

Short-term Residential(SR)

A. ALCOHOL ABSTINENCE AMONG ALL CLIENTS – CHANGE IN ABSTINENCE (From Admission to Discharge)

Alcohol Abstinence – Clients with no alcohol use at admission vs. discharge, as a percent of all clients (regardless of primary problem)

	At Admission(T1)	At Discharge(T2)
Number of clients abstinent from alcohol [numerator]	5,083	5,954
All clients with non-missing values on at least one substance/frequency of use [denominator]	7,692	7,692
Percent of clients abstinent from alcohol	66.1 %	77.4 %

B. ALCOHOL ABSTINENCE AT DISCHARGE, AMONG ALCOHOL USERS AT ADMISSION

Clients abstinent from alcohol at discharge among clients using alcohol at admission (regardless of primary problem)

	At Admission(T1)	At Discharge(T2)
Number of clients abstinent from alcohol at discharge among clients using alcohol at admission [numerator]		891
Number of clients using alcohol at admission (records with at least one substance/frequency of use at admission and discharge [denominator]	2,609	
Percent of clients abstinent from alcohol at discharge among clients using alcohol at admission [#T2 / #T1 x 100]		34.2 %

C. ALCOHOL ABSTINENCE AT DISCHARGE, AMONG ALCOHOL ABSTINENT AT ADMISSION

Clients abstinent from alcohol at discharge among clients abstinent from alcohol at admission (regardless of primary problem)

	At Admission(T1)	At Discharge(T2)
Number of clients abstinent from alcohol at discharge among clients abstinent from alcohol at admission [numerator]		5,063
Number of clients abstinent from alcohol at admission (records with at least one substance/frequency of use at admission and discharge [denominator]	5,083	
Percent of clients abstinent from alcohol at discharge among clients abstinent from alcohol at admission [#T2 / #T1 x 100]		99.6 %

Notes (for this level of care):

Number of CY 2015 admissions submitted:	4,762
Number of CY 2015 discharges submitted:	8,271
Number of CY 2015 discharges linked to an admission:	8,269
Number of linked discharges after exclusions (excludes: detox, hospital inpatient, opioid replacement clients; deaths; incarcerated):	8,161
Number of CY 2015 linked discharges eligible for this calculation (non-missing values):	7,692

Source: SAMHSA/CBHSQ TEDS CY 2015 admissions file and CY 2015 linked discharge file

[Records received through 5/3/2016]

Long-term Residential(LR)

A. ALCOHOL ABSTINENCE AMONG ALL CLIENTS – CHANGE IN ABSTINENCE (From Admission to Discharge)

Alcohol Abstinence – Clients with no alcohol use at admission vs. discharge, as a percent of all clients (regardless of primary problem)

	At Admission(T1)	At Discharge(T2)
Number of clients abstinent from alcohol [numerator]	0	0
All clients with non-missing values on at least one substance/frequency of use [denominator]	0	0
Percent of clients abstinent from alcohol	0.0 %	0.0 %

B. ALCOHOL ABSTINENCE AT DISCHARGE, AMONG ALCOHOL USERS AT ADMISSION

Clients abstinent from alcohol at discharge among clients using alcohol at admission (regardless of primary problem)

	At Admission(T1)	At Discharge(T2)
Number of clients abstinent from alcohol at discharge among clients using alcohol at admission [numerator]		0
Number of clients using alcohol at admission (records with at least one substance/frequency of use at admission and discharge [denominator]	0	
Percent of clients abstinent from alcohol at discharge among clients using alcohol at admission [#T2 / #T1 x 100]		0.0 %

C. ALCOHOL ABSTINENCE AT DISCHARGE, AMONG ALCOHOL ABSTINENT AT ADMISSION

Clients abstinent from alcohol at discharge among clients abstinent from alcohol at admission (regardless of primary problem)

	At Admission(T1)	At Discharge(T2)
Number of clients abstinent from alcohol at discharge among clients abstinent from alcohol at admission [numerator]		0
Number of clients abstinent from alcohol at admission (records with at least one substance/frequency of use at admission and discharge [denominator]	0	
Percent of clients abstinent from alcohol at discharge among clients abstinent from alcohol at admission [#T2 / #T1 x 100]		0.0 %

Notes (for this level of care):

Number of CY 2015 admissions submitted:	0
Number of CY 2015 discharges submitted:	0
Number of CY 2015 discharges linked to an admission:	0
Number of linked discharges after exclusions (excludes: detox, hospital inpatient, opioid replacement clients; deaths; incarcerated):	0
Number of CY 2015 linked discharges eligible for this calculation (non-missing values):	0

Source: SAMHSA/CBHSQ TEDS CY 2015 admissions file and CY 2015 linked discharge file
[Records received through 5/3/2016]

Outpatient (OP)

A. ALCOHOL ABSTINENCE AMONG ALL CLIENTS – CHANGE IN ABSTINENCE (From Admission to Discharge)

Alcohol Abstinence – Clients with no alcohol use at admission vs. discharge, as a percent of all clients (regardless of primary problem)

	At Admission(T1)	At Discharge(T2)
Number of clients abstinent from alcohol [numerator]	7,318	8,137
All clients with non-missing values on at least one substance/frequency of use [denominator]	8,511	8,511
Percent of clients abstinent from alcohol	86.0 %	95.6 %

B. ALCOHOL ABSTINENCE AT DISCHARGE, AMONG ALCOHOL USERS AT ADMISSION

Clients abstinent from alcohol at discharge among clients using alcohol at admission (regardless of primary problem)

	At Admission(T1)	At Discharge(T2)
Number of clients abstinent from alcohol at discharge among clients using alcohol at admission [numerator]		888
Number of clients using alcohol at admission (records with at least one substance/frequency of use at admission and discharge [denominator]	1,193	
Percent of clients abstinent from alcohol at discharge among clients using alcohol at admission [#T2 / #T1 x 100]		74.4 %

C. ALCOHOL ABSTINENCE AT DISCHARGE, AMONG ALCOHOL ABSTINENT AT ADMISSION

Clients abstinent from alcohol at discharge among clients abstinent from alcohol at admission (regardless of primary problem)

	At Admission(T1)	At Discharge(T2)
Number of clients abstinent from alcohol at discharge among clients abstinent from alcohol at admission [numerator]		7,249
Number of clients abstinent from alcohol at admission (records with at least one substance/frequency of use at admission and discharge [denominator]	7,318	
Percent of clients abstinent from alcohol at discharge among clients abstinent from alcohol at admission [#T2 / #T1 x 100]		99.1 %

Notes (for this level of care):

Number of CY 2015 admissions submitted:	8,680
Number of CY 2015 discharges submitted:	12,569
Number of CY 2015 discharges linked to an admission:	10,156
Number of linked discharges after exclusions (excludes: detox, hospital inpatient, opioid replacement clients; deaths; incarcerated):	9,444
Number of CY 2015 linked discharges eligible for this calculation (non-missing values):	8,511

Source: SAMHSA/CBHSQ TEDS CY 2015 admissions file and CY 2015 linked discharge file
[Records received through 5/3/2016]

Intensive Outpatient (IO)

A. ALCOHOL ABSTINENCE AMONG ALL CLIENTS – CHANGE IN ABSTINENCE (From Admission to Discharge)

Alcohol Abstinence – Clients with no alcohol use at admission vs. discharge, as a percent of all clients (regardless of primary problem)

	At Admission(T1)	At Discharge(T2)
Number of clients abstinent from alcohol [numerator]	15,199	17,046

All clients with non-missing values on at least one substance/frequency of use [denominator]	19,151	19,151
Percent of clients abstinent from alcohol	79.4 %	89.0 %

B. ALCOHOL ABSTINENCE AT DISCHARGE, AMONG ALCOHOL USERS AT ADMISSION

Clients abstinent from alcohol at discharge among clients using alcohol at admission (regardless of primary problem)

	At Admission(T1)	At Discharge(T2)
Number of clients abstinent from alcohol at discharge among clients using alcohol at admission [numerator]		2,004
Number of clients using alcohol at admission (records with at least one substance/frequency of use at admission and discharge [denominator])	3,952	
Percent of clients abstinent from alcohol at discharge among clients using alcohol at admission [#T2 / #T1 x 100]		50.7 %

C. ALCOHOL ABSTINENCE AT DISCHARGE, AMONG ALCOHOL ABSTINENT AT ADMISSION

Clients abstinent from alcohol at discharge among clients abstinent from alcohol at admission (regardless of primary problem)

	At Admission(T1)	At Discharge(T2)
Number of clients abstinent from alcohol at discharge among clients abstinent from alcohol at admission [numerator]		15,042
Number of clients abstinent from alcohol at admission (records with at least one substance/frequency of use at admission and discharge [denominator])	15,199	
Percent of clients abstinent from alcohol at discharge among clients abstinent from alcohol at admission [#T2 / #T1 x 100]		99.0 %
Notes (for this level of care):		
Number of CY 2015 admissions submitted:		15,222
Number of CY 2015 discharges submitted:		22,729
Number of CY 2015 discharges linked to an admission:		21,641
Number of linked discharges after exclusions (excludes: detox, hospital inpatient, opioid replacement clients; deaths; incarcerated):		21,273
Number of CY 2015 linked discharges eligible for this calculation (non-missing values):		19,151

Source: SAMHSA/CBHSQ TEDS CY 2015 admissions file and CY 2015 linked discharge file
[Records received through 5/3/2016]

Footnotes:

Missouri does not have long-term residential treatment.

V: Performance Indicators and Accomplishments

Table 18 - Treatment Performance Measure Change in Abstinence - Other Drug Use (From Admission to Discharge)

Short-term Residential(SR)

A. DRUG ABSTINENCE AMONG ALL CLIENTS – CHANGE IN ABSTINENCE (From Admission to Discharge)

Drug Abstinence – Clients with no Drug use at admission vs. discharge, as a percent of all clients (regardless of primary problem)

	At Admission(T1)	At Discharge(T2)
Number of clients abstinent from drugs [numerator]	1,952	3,769
All clients with non-missing values on at least one substance/frequency of use [denominator]	7,692	7,692
Percent of clients abstinent from drugs	25.4 %	49.0 %

B. DRUG ABSTINENCE AT DISCHARGE, AMONG DRUG USERS AT ADMISSION

Clients abstinent from Drug at discharge among clients using Drug at admission (regardless of primary problem)

	At Admission(T1)	At Discharge(T2)
Number of clients abstinent from drugs at discharge among clients using drugs at admission [numerator]		1,853
Number of clients using drugs at admission (records with at least one substance/frequency of use at admission and discharge [denominator]	5,740	
Percent of clients abstinent from drugs at discharge among clients using Drug at admission [#T2 / #T1 x 100]		32.3 %

C. DRUG ABSTINENCE AT DISCHARGE, AMONG DRUG ABSTINENT AT ADMISSION

Clients abstinent from Drug at discharge among clients abstinent from Drug at admission (regardless of primary problem)

	At Admission(T1)	At Discharge(T2)
Number of clients abstinent from drugs at discharge among clients abstinent from drugs at admission [numerator]		1,916
Number of clients abstinent from drugs at admission (records with at least one substance/frequency of use at admission and discharge [denominator]	1,952	
Percent of clients abstinent from drugs at discharge among clients abstinent from Drug at admission [#T2 / #T1 x 100]		98.2 %

Notes (for this level of care):

Number of CY 2015 admissions submitted:	4,762
Number of CY 2015 discharges submitted:	8,271
Number of CY 2015 discharges linked to an admission:	8,269
Number of linked discharges after exclusions (excludes: detox, hospital inpatient, opioid replacement clients; deaths; incarcerated):	8,161
Number of CY 2015 linked discharges eligible for this calculation (non-missing values):	7,692

Source: SAMHSA/CBHSQ TEDS CY 2015 admissions file and CY 2015 linked discharge file

[Records received through 5/3/2016]

Long-term Residential(LR)

A. DRUG ABSTINENCE AMONG ALL CLIENTS – CHANGE IN ABSTINENCE (From Admission to Discharge)

Drug Abstinence – Clients with no Drug use at admission vs. discharge, as a percent of all clients (regardless of primary problem)

	At Admission(T1)	At Discharge(T2)
Number of clients abstinent from drugs [numerator]	0	0
All clients with non-missing values on at least one substance/frequency of use [denominator]	0	0
Percent of clients abstinent from drugs	0.0 %	0.0 %

B. DRUG ABSTINENCE AT DISCHARGE, AMONG DRUG USERS AT ADMISSION

Clients abstinent from Drug at discharge among clients using Drug at admission (regardless of primary problem)

	At Admission(T1)	At Discharge(T2)
Number of clients abstinent from drugs at discharge among clients using drugs at admission [numerator]		0
Number of clients using drugs at admission (records with at least one substance/frequency of use at admission and discharge [denominator]	0	
Percent of clients abstinent from drugs at discharge among clients using Drug at admission [#T2 / #T1 x 100]		0.0 %

C. DRUG ABSTINENCE AT DISCHARGE, AMONG DRUG ABSTINENT AT ADMISSION

Clients abstinent from Drug at discharge among clients abstinent from Drug at admission (regardless of primary problem)

	At Admission(T1)	At Discharge(T2)
Number of clients abstinent from drugs at discharge among clients abstinent from drugs at admission [numerator]		0
Number of clients abstinent from drugs at admission (records with at least one substance/frequency of use at admission and discharge [denominator]	0	
Percent of clients abstinent from drugs at discharge among clients abstinent from Drug at admission [#T2 / #T1 x 100]		0.0 %

Notes (for this level of care):

Number of CY 2015 admissions submitted:	0
Number of CY 2015 discharges submitted:	0
Number of CY 2015 discharges linked to an admission:	0
Number of linked discharges after exclusions (excludes: detox, hospital inpatient, opioid replacement clients; deaths; incarcerated):	0
Number of CY 2015 linked discharges eligible for this calculation (non-missing values):	0

Source: SAMHSA/CBHSQ TEDS CY 2015 admissions file and CY 2015 linked discharge file
[Records received through 5/3/2016]

Outpatient (OP)

A. DRUG ABSTINENCE AMONG ALL CLIENTS – CHANGE IN ABSTINENCE (From Admission to Discharge)

Drug Abstinence – Clients with no Drug use at admission vs. discharge, as a percent of all clients (regardless of primary problem)

	At Admission(T1)	At Discharge(T2)
Number of clients abstinent from drugs [numerator]	7,231	7,956
All clients with non-missing values on at least one substance/frequency of use [denominator]	8,511	8,511
Percent of clients abstinent from drugs	85.0 %	93.5 %

B. DRUG ABSTINENCE AT DISCHARGE, AMONG DRUG USERS AT ADMISSION

Clients abstinent from Drug at discharge among clients using Drug at admission (regardless of primary problem)

	At Admission(T1)	At Discharge(T2)
Number of clients abstinent from drugs at discharge among clients using drugs at admission [numerator]		845
Number of clients using drugs at admission (records with at least one substance/frequency of use at admission and discharge [denominator]	1,280	
Percent of clients abstinent from drugs at discharge among clients using Drug at admission [#T2 / #T1 x 100]		66.0 %

C. DRUG ABSTINENCE AT DISCHARGE, AMONG DRUG ABSTINENT AT ADMISSION

Clients abstinent from Drug at discharge among clients abstinent from Drug at admission (regardless of primary problem)

	At Admission(T1)	At Discharge(T2)
Number of clients abstinent from drugs at discharge among clients abstinent from drugs at admission [numerator]		7,111
Number of clients abstinent from drugs at admission (records with at least one substance/frequency of use at admission and discharge [denominator]	7,231	
Percent of clients abstinent from drugs at discharge among clients abstinent from Drug at admission [#T2 / #T1 x 100]		98.3 %

Notes (for this level of care):

Number of CY 2015 admissions submitted:	8,680
Number of CY 2015 discharges submitted:	12,569
Number of CY 2015 discharges linked to an admission:	10,156
Number of linked discharges after exclusions (excludes: detox, hospital inpatient, opioid replacement clients; deaths; incarcerated):	9,444
Number of CY 2015 linked discharges eligible for this calculation (non-missing values):	8,511

Source: SAMHSA/CBHSQ TEDS CY 2015 admissions file and CY 2015 linked discharge file
[Records received through 5/3/2016]

Intensive Outpatient (IO)

A. DRUG ABSTINENCE AMONG ALL CLIENTS – CHANGE IN ABSTINENCE (From Admission to Discharge)

Drug Abstinence – Clients with no Drug use at admission vs. discharge, as a percent of all clients (regardless of primary problem)

	At Admission(T1)	At Discharge(T2)
Number of clients abstinent from drugs [numerator]	10,532	14,235

All clients with non-missing values on at least one substance/frequency of use [denominator]	19,151	19,151
Percent of clients abstinent from drugs	55.0 %	74.3 %

B. DRUG ABSTINENCE AT DISCHARGE, AMONG DRUG USERS AT ADMISSION

Clients abstinent from Drug at discharge among clients using Drug at admission (regardless of primary problem)

	At Admission(T1)	At Discharge(T2)
Number of clients abstinent from drugs at discharge among clients using drugs at admission [numerator]		4,044
Number of clients using drugs at admission (records with at least one substance/frequency of use at admission and discharge [denominator]	8,619	
Percent of clients abstinent from drugs at discharge among clients using Drug at admission [#T2 / #T1 x 100]		46.9 %

C. DRUG ABSTINENCE AT DISCHARGE, AMONG DRUG ABSTINENT AT ADMISSION

Clients abstinent from Drug at discharge among clients abstinent from Drug at admission (regardless of primary problem)

	At Admission(T1)	At Discharge(T2)
Number of clients abstinent from drugs at discharge among clients abstinent from drugs at admission [numerator]		10,191
Number of clients abstinent from drugs at admission (records with at least one substance/frequency of use at admission and discharge [denominator]	10,532	
Percent of clients abstinent from drugs at discharge among clients abstinent from Drug at admission [#T2 / #T1 x 100]		96.8 %
Notes (for this level of care):		
Number of CY 2015 admissions submitted:		15,222
Number of CY 2015 discharges submitted:		22,729
Number of CY 2015 discharges linked to an admission:		21,641
Number of linked discharges after exclusions (excludes: detox, hospital inpatient, opioid replacement clients; deaths; incarcerated):		21,273
Number of CY 2015 linked discharges eligible for this calculation (non-missing values):		19,151

Source: SAMHSA/CBHSQ TEDS CY 2015 admissions file and CY 2015 linked discharge file
[Records received through 5/3/2016]

Footnotes:

Missouri does not have long-term residential treatment.

V: Performance Indicators and Accomplishments

Table 19 - Treatment Performance Measure Change in Social Support Of Recovery (From Admission to Discharge)

Short-term Residential(SR)

Social Support of Recovery – Clients attending Self-help Programs (e.g., AA, NA, etc.) (prior 30 days) at admission vs. discharge

	At Admission(T1)	At Discharge(T2)
Number of clients attending self-help programs [numerator]	1,174	2,423
Total number of clients with non-missing values on self-help attendance [denominator]	7,411	7,411
Percent of clients attending self-help programs	15.8 %	32.7 %
Percent of clients with self-help attendance at discharge minus percent of clients with self-help attendance at admission Absolute Change [%T2-%T1]	16.9 %	
Notes (for this level of care):		
Number of CY 2015 admissions submitted:		4,762
Number of CY 2015 discharges submitted:		8,271
Number of CY 2015 discharges linked to an admission:		8,269
Number of linked discharges after exclusions (excludes: detox, hospital inpatient, opioid replacement clients; deaths; incarcerated):		8,161
Number of CY 2015 linked discharges eligible for this calculation (non-missing values):		7,411

Source: SAMHSA/CBHSQ TEDS CY 2015 admissions file and CY 2015 linked discharge file
[Records received through 5/3/2016]

Long-term Residential(LR)

Social Support of Recovery – Clients attending Self-help Programs (e.g., AA, NA, etc.) (prior 30 days) at admission vs. discharge

	At Admission(T1)	At Discharge(T2)
Number of clients attending self-help programs [numerator]	0	0
Total number of clients with non-missing values on self-help attendance [denominator]	0	0
Percent of clients attending self-help programs	0.0 %	0.0 %
Percent of clients with self-help attendance at discharge minus percent of clients with self-help attendance at admission Absolute Change [%T2-%T1]	0.0 %	
Notes (for this level of care):		
Number of CY 2015 admissions submitted:	0	
Number of CY 2015 discharges submitted:	0	

Number of CY 2015 discharges linked to an admission:	0
Number of linked discharges after exclusions (excludes: detox, hospital inpatient, opioid replacement clients; deaths; incarcerated):	0
Number of CY 2015 linked discharges eligible for this calculation (non-missing values):	0

Source: SAMHSA/CBHSQ TEDS CY 2015 admissions file and CY 2015 linked discharge file
[Records received through 5/3/2016]

Outpatient (OP)

Social Support of Recovery – Clients attending Self-help Programs (e.g., AA, NA, etc.) (prior 30 days) at admission vs. discharge

	At Admission(T1)	At Discharge(T2)
Number of clients attending self-help programs [numerator]	1,960	2,274
Total number of clients with non-missing values on self-help attendance [denominator]	7,197	7,197
Percent of clients attending self-help programs	27.2 %	31.6 %
Percent of clients with self-help attendance at discharge minus percent of clients with self-help attendance at admission Absolute Change [%T2-%T1]	4.4 %	
Notes (for this level of care):		
Number of CY 2015 admissions submitted:	8,680	
Number of CY 2015 discharges submitted:	12,569	
Number of CY 2015 discharges linked to an admission:	10,156	
Number of linked discharges after exclusions (excludes: detox, hospital inpatient, opioid replacement clients; deaths; incarcerated):	9,444	
Number of CY 2015 linked discharges eligible for this calculation (non-missing values):	7,197	

Source: SAMHSA/CBHSQ TEDS CY 2015 admissions file and CY 2015 linked discharge file
[Records received through 5/3/2016]

Intensive Outpatient (IO)

Social Support of Recovery – Clients attending Self-help Programs (e.g., AA, NA, etc.) (prior 30 days) at admission vs. discharge

	At Admission(T1)	At Discharge(T2)
Number of clients attending self-help programs [numerator]	3,674	3,938
Total number of clients with non-missing values on self-help attendance [denominator]	16,102	16,102
Percent of clients attending self-help programs	22.8 %	24.5 %
Percent of clients with self-help attendance at discharge minus percent of clients with self-help attendance at admission Absolute Change [%T2-%T1]	1.6 %	
Notes (for this level of care):		

Number of CY 2015 admissions submitted:	15,222
Number of CY 2015 discharges submitted:	22,729
Number of CY 2015 discharges linked to an admission:	21,641
Number of linked discharges after exclusions (excludes: detox, hospital inpatient, opioid replacement clients; deaths; incarcerated):	21,273
Number of CY 2015 linked discharges eligible for this calculation (non-missing values):	16,102

Source: SAMHSA/CBHSQ TEDS CY 2015 admissions file and CY 2015 linked discharge file
[Records received through 5/3/2016]

Footnotes:

Missouri does not have long-term residential treatment.

V: Performance Indicators and Accomplishments

Table 20 - Retention - Length of Stay (in Days) of Clients Completing Treatment

Most recent year for which data are available

From: 7/1/2015

To: 6/30/2016

Level of Care	Average	Median	Interquartile Range
DETOXIFICATION (24-HOUR CARE)			
1. Hospital Inpatient			
2. Free-Standing Residential	4.18	3	2.00
REHABILITATION/RESIDENTIAL			
3. Hospital Inpatient			
4. Short-term (up to 30 days)	25	20	17.00
5. Long-term (over 30 days)			
AMBULATORY (OUTPATIENT)			
6. Outpatient	107.45	77	93.00
7. Intensive Outpatient	85.26	55	102.00
8. Detoxification			
OPIOID REPLACEMENT THERAPY			
9. Opioid Replacement Therapy	521.77	118	349.00
10. ORT Outpatient			

Footnotes:

Missouri does not have long-term residential treatment.

V: Performance Indicators and Accomplishments

Table 21 - Prevention Performance Measures - Reduced Morbidity-Abstinence from Drug Use/Alcohol Use; Measure: 30 Day Use

A. Measure	B. Question/Response	C. Pre- populated Data	D. Approved Substitute Data
1. 30-day Alcohol Use	Source Survey Item: NSDUH Questionnaire. "Think specifically about the past 30 days, that is, from [DATEFILL] through today. During the past 30 days, on how many days did you drink one or more drinks of an alcoholic beverage?[Response option: Write in a number between 0 and 30.] Outcome Reported: Percent who reported having used alcohol during the past 30 days.		
	Age 12 - 17 - CY 2013 - 2014	11.0	
	Age 18+ - CY 2013 - 2014	55.6	
2. 30-day Cigarette Use	Source Survey Item: NSDUH Questionnaire: "During the past 30 days, that is, since [DATEFILL], on how many days did you smoke part or all of a cigarette?[Response option: Write in a number between 0 and 30.] Outcome Reported: Percent who reported having smoked a cigarette during the past 30 days.		
	Age 12 - 17 - CY 2013 - 2014	8.1	
	Age 18+ - CY 2013 - 2014	30.9	
3. 30-day Use of Other Tobacco Products	Survey Item: NSDUH Questionnaire: "During the past 30 days, that is, since [DATEFILL], on how many days did you use [other tobacco products] ^[1] ?[Response option: Write in a number between 0 and 30.] Outcome Reported: Percent who reported having used a tobacco product other than cigarettes during the past 30 days, calculated by combining responses to questions about individual tobacco products (snuff, chewing tobacco, pipe tobacco).		
	Age 12 - 17 - CY 2013 - 2014	5.5	
	Age 18+ - CY 2013 - 2014	10.1	
4. 30-day Use of Marijuana	Source Survey Item: NSDUH Questionnaire: "Think specifically about the past 30 days, from [DATEFILL] up to and including today. During the past 30 days, on how many days did you use marijuana or hashish?[Response option: Write in a number between 0 and 30.] Outcome Reported: Percent who reported having used marijuana or hashish during the past 30 days.		
	Age 12 - 17 - CY 2013 - 2014	5.1	
	Age 18+ - CY 2013 - 2014	8.1	
5. 30-day Use of Illegal Drugs Other Than Marijuana	Source Survey Item: NSDUH Questionnaire: "Think specifically about the past 30 days, from [DATEFILL] up to and including today. During the past 30 days, on how many days did you use [any other illegal drug] ^[2] ? Outcome Reported: Percent who reported having used illegal drugs other than marijuana or hashish during the past 30 days, calculated by combining responses to questions about individual drugs (heroin, cocaine, stimulants, hallucinogens, inhalants, prescription drugs used without doctors' orders).		
	Age 12 - 17 - CY 2013 - 2014	2.4	
	Age 18+ - CY 2013 - 2014	2.6	

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[1]NSDUH asks separate questions for each tobacco product. The number provided combines responses to all questions about tobacco products other than cigarettes.

[2]NSDUH asks separate questions for each illegal drug. The number provided combines responses to all questions about illegal drugs other than marijuana or hashish.

Footnotes:

V: Performance Indicators and Accomplishments

Table 22 - Prevention Performance Measures - Reduced Morbidity-Abstinence from Drug Use/Alcohol Use; Measure: Perception Of Risk/Harm of Use

A. Measure	B. Question/Response	C. Pre- populated Data	D. Approved Substitute Data
1. Perception of Risk From Alcohol	Source Survey Item: NSDUH Questionnaire: "How much do people risk harming themselves physically and in other ways when they have five or more drinks of an alcoholic beverage once or twice a week?[Response options: No risk, slight risk, moderate risk, great risk] Outcome Reported: Percent reporting moderate or great risk.		
	Age 12 - 17 - CY 2013 - 2014	75.3	
	Age 18+ - CY 2013 - 2014	71.5	
2. Perception of Risk From Cigarettes	Source Survey Item: NSDUH Questionnaire: "How much do people risk harming themselves physically and in other ways when they smoke one or more packs of cigarettes per day?[Response options: No risk, slight risk, moderate risk, great risk] Outcome Reported: Percent reporting moderate or great risk.		
	Age 12 - 17 - CY 2013 - 2014	91.2	
	Age 18+ - CY 2013 - 2014	91.2	
3. Perception of Risk From Marijuana	Source Survey Item: NSDUH Questionnaire: "How much do people risk harming themselves physically and in other ways when they smoke marijuana once or twice a week?[Response options: No risk, slight risk, moderate risk, great risk] Outcome Reported: Percent reporting moderate or great risk.		
	Age 12 - 17 - CY 2013 - 2014	70.9	
	Age 18+ - CY 2013 - 2014	55.6	

Footnotes:

V: Performance Indicators and Accomplishments

Table 23 - Prevention Performance Measures - Reduced Morbidity-Abstinence from Drug Use/Alcohol Use; Measure: Age of First Use

A. Measure	B. Question/Response	C. Pre- populated Data	D. Approved Substitute Data
1. Age at First Use of Alcohol	Source Survey Item: NSDUH Questionnaire: "Think about the first time you had a drink of an alcoholic beverage. How old were you the first time you had a drink of an alcoholic beverage? Please do not include any time when you only had a sip or two from a drink.?[Response option: Write in age at first use.] Outcome Reported: Average age at first use of alcohol.risk.		
	Age 12 - 17 - CY 2013 - 2014	14.1	
	Age 18+ - CY 2013 - 2014	17.0	
2. Age at First Use of Cigarettes	Source Survey Item: NSDUH Questionnaire: "How old were you the first time you smoked part or all of a cigarette?[Response option: Write in age at first use.] Outcome Reported: Average age at first use of cigarettes.		
	Age 12 - 17 - CY 2013 - 2014	13.4	
	Age 18+ - CY 2013 - 2014	15.8	
3. Age at First Use of Tobacco Products Other Than Cigarettes	Source Survey Item: NSDUH Questionnaire: "How old were you the first time you used [any other tobacco product] ^[1] ?[Response option: Write in age at first use.] Outcome Reported: Average age at first use of tobacco products other than cigarettes.		
	Age 12 - 17 - CY 2013 - 2014	14.0	
	Age 18+ - CY 2013 - 2014	19.2	
4. Age at First Use of Marijuana or Hashish	Source Survey Item: NSDUH Questionnaire: "How old were you the first time you used marijuana or hashish?[Response option: Write in age at first use.] Outcome Reported: Average age at first use of marijuana or hashish.		
	Age 12 - 17 - CY 2013 - 2014	14.1	
	Age 18+ - CY 2013 - 2014	18.0	
5. Age at First Use of Illegal Drugs Other Than Marijuana or Hashish	Source Survey Item: NSDUH Questionnaire: "How old were you the first time you used [other illegal drugs] ^[2] ?[Response option: Write in age at first use.] Outcome Reported: Average age at first use of other illegal drugs.		
	Age 12 - 17 - CY 2013 - 2014	12.8	
	Age 18+ - CY 2013 - 2014	20.4	

[1]The question was asked about each tobacco product separately, and the youngest age at first use was taken as the measure.

[2]The question was asked about each drug in this category separately, and the youngest age at first use was taken as the measure.

Footnotes:

V: Performance Indicators and Accomplishments

Table 24 - Prevention Performance Measures - Reduced Morbidity-Abstinence from Drug Use/Alcohol Use; Measure: Perception of Disapproval/Attitudes

A. Measure	B. Question/Response	C. Pre- populated Data	D. Approved Substitute Data
1. Disapproval of Cigarettes	Source Survey Item: NSDUH Questionnaire: "How do you feel about someone your age smoking one or more packs of cigarettes a day?[Response options: Neither approve nor disapprove, somewhat disapprove, strongly disapprove] Outcome Reported: Percent somewhat or strongly disapproving.		
	Age 12 - 17 - CY 2013 - 2014	91.0	
2. Perception of Peer Disapproval of Cigarettes	Source Survey Item: NSDUH Questionnaire: "How do you think your close friends would feel about you smoking one or more packs of cigarettes a day?[Response options: Neither approve nor disapprove, somewhat disapprove, strongly disapprove] Outcome Reported: Percent reporting that their friends would somewhat or strongly disapprove.		
	Age 12 - 17 - CY 2013 - 2014	87.0	
3. Disapproval of Using Marijuana Experimentally	Source Survey Item: NSDUH Questionnaire: "How do you feel about someone your age trying marijuana or hashish once or twice?[Response options: Neither approve nor disapprove, somewhat disapprove, strongly disapprove] Outcome Reported: Percent somewhat or strongly disapproving.		
	Age 12 - 17 - CY 2013 - 2014	79.2	
4. Disapproval of Using Marijuana Regularly	Source Survey Item: NSDUH Questionnaire: "How do you feel about someone your age using marijuana once a month or more?[Response options: Neither approve nor disapprove, somewhat disapprove, strongly disapprove] Outcome Reported: Percent somewhat or strongly disapproving.		
	Age 12 - 17 - CY 2013 - 2014	80.2	
5. Disapproval of Alcohol	Source Survey Item: NSDUH Questionnaire: "How do you feel about someone your age having one or two drinks of an alcoholic beverage nearly every day?[Response options: Neither approve nor disapprove, somewhat disapprove, strongly disapprove] Outcome Reported: Percent somewhat or strongly disapproving.		
	Age 12 - 17 - CY 2013 - 2014	87.7	

Footnotes:

V: Performance Indicators and Accomplishments

Table 25 - Prevention Performance Measures - Employment/Education; Measure: Perception of Workplace Policy

A. Measure	B. Question/Response	C. Pre- populated Data	D. Approved Substitute Data
Perception of Workplace Policy	Source Survey Item: NSDUH Questionnaire: "Would you be more or less likely to want to work for an employer that tests its employees for drug or alcohol use on a random basis? Would you say more likely, less likely, or would it make no difference to you?[Response options: More likely, less likely, would make no difference] Outcome Reported: Percent reporting that they would be more likely to work for an employer conducting random drug and alcohol tests.		
	Age 18+ - CY 2013 - 2014	34.5	
	Age 12 - 17 - CY 2013 - 2014		

Footnotes:

V: Performance Indicators and Accomplishments

Table 26 - Prevention Performance Measures - Employment/Education; Measure: Average Daily School Attendance Rate

A. Measure	B. Question/Response	C. Pre- populated Data	D. Approved Substitute Data
Average Daily School Attendance Rate	Source: National Center for Education Statistics, Common Core of Data: <i>The National Public Education Finance Survey</i> available for download at http://nces.ed.gov/ccd/stfis.asp . Measure calculation: Average daily attendance (NCES defined) divided by total enrollment and multiplied by 100.		
	School Year 2013		

Footnotes:

V: Performance Indicators and Accomplishments

Table 27 - Prevention Performance Measures - Crime and Criminal Justice; Measure: Alcohol-Related Traffic Fatalities

A. Measure	B. Question/Response	C. Pre- populated Data	D. Approved Substitute Data
Alcohol-Related Traffic Fatalities	Source: National Highway Traffic Safety Administration Fatality Analysis Reporting System Measure calculation: The number of alcohol-related traffic fatalities divided by the total number of traffic fatalities and multiplied by 100.		
	CY 2014 - 2015		

Footnotes:

V: Performance Indicators and Accomplishments

Table 28 - Prevention Performance Measures - Crime and Criminal Justice; Measure: Alcohol and Drug Related Arrests

A. Measure	B. Question/Response	C. Pre- populated Data	D. Approved Substitute Data
Alcohol- and Drug- Related Arrests	Source: Federal Bureau of Investigation Uniform Crime Reports Measure calculation: The number of alcohol- and drug-related arrests divided by the total number of arrests and multiplied by 100.		
	CY 2014		

Footnotes:

V: Performance Indicators and Accomplishments

Table 29 - Prevention Performance Measures - Social Connectedness; Measure: Family Communications Around Drug and Alcohol Use

A. Measure	B. Question/Response	C. Pre- populated Data	D. Approved Substitute Data
1. Family Communications Around Drug and Alcohol Use (Youth)	Source Survey Item: NSDUH Questionnaire: "Now think about the past 12 months, that is, from [DATEFILL] through today. During the past 12 months, have you talked with at least one of your parents about the dangers of tobacco, alcohol, or drug use? By parents, we mean either your biological parents, adoptive parents, stepparents, or adult guardians, whether or not they live with you.?[Response options: Yes, No] Outcome Reported: Percent reporting having talked with a parent.		
	Age 12 - 17 - CY 2013 - 2014	57.6	
2. Family Communications Around Drug and Alcohol Use (Parents of children aged 12-17)	Source Survey Item: NSDUH Questionnaire: "During the past 12 months, how many times have you talked with your child about the dangers or problems associated with the use of tobacco, alcohol, or other drugs? ^[1] [Response options: 0 times, 1 to 2 times, a few times, many times] Outcome Reported: Percent of parents reporting that they have talked to their child.		
	Age 18+ - CY 2013 - 2014	93.7	

[1]NSDUH does not ask this question of all sampled parents. It is a validation question posed to parents of 12- to 17-year-old survey respondents. Therefore, the responses are not representative of the population of parents in a State. The sample sizes are often too small for valid reporting.

Footnotes:

V: Performance Indicators and Accomplishments

Table 30 - Prevention Performance Measures - Retention; Measure: Percentage of Youth Seeing, Reading, Watching, or Listening to a Prevention Message

A. Measure	B. Question/Response	C. Pre- populated Data	D. Approved Substitute Data
Exposure to Prevention Messages	Source Survey Item: NSDUH Questionnaire: "During the past 12 months, do you recall [hearing, reading, or watching an advertisement about the prevention of substance use] ^[1] ?" Outcome Reported: Percent reporting having been exposed to prevention message.		
	Age 12 - 17 - CY 2013 - 2014	85.6	

[1]This is a summary of four separate NSDUH questions each asking about a specific type of prevention message delivered within a specific context having been exposed to prevention message.

Footnotes:

V: Performance Indicators and Accomplishments

Table 31-35 - Reporting Period - Start and End Dates for Information Reported on Tables 31, 32, 33, 34, and 35

Reporting Period Start and End Dates for Information Reported on Tables 33, 34, 35, 36 and 37

Please indicate the reporting period (start date and end date totaling 12 months by the State) for each of the following forms:

Tables	A. Reporting Period Start Date	B. Reporting Period End Date
1. Table 31 - Prevention Performance Measures - Individual-Based Programs and Strategies; Measure: Number of Persons Served By Age, Gender, Race, And Ethnicity	1/1/2014	12/31/2014
2. Table 32 - Prevention Performance Measures - Population-Based Programs And Strategies; Measure: Number of Persons Served By Age, Gender, Race, And Ethnicity	1/1/2014	12/31/2014
3. Table 33 - Prevention Performance Measures - Number of Persons Served by Type of Intervention	1/1/2014	12/31/2014
4. Table 34 - Prevention Performance Measures - Number of Evidence-Based Programs by Types of Intervention	1/1/2014	12/31/2014
5. Table 35 - Prevention Performance Measures - Total Number of Evidence-Based Programs and Total SAPTBG Dollars Spent on Evidence-Based Programs/Strategies	10/1/2013	9/30/2015

Question 1: Describe the data collection system you used to collect the NOMs data (e.g., MDS, DbB, KIT Solutions, manual process).

Missouri used the MDS and manual data collection systems.

Question 2: Describe how your State's data collection and reporting processes record a participant's race, specifically for participants who are more than one race.

Indicate whether the State added those participants to the number for each applicable racial category or whether the State added all those participants to the More Than One Race subcategory.

Missouri collected and recorded a participant's race through the MDS system and manual collection process. Participants who were more than one race were reported either under a single race or "race not known or other" - the state does not use more than one race category.

Footnotes:

V: Performance Indicators and Accomplishments

Table 31 - Prevention Performance Measures - Individual-Based Programs and Strategies; Measure: Number of Persons Served By Age, Gender, Race, And Ethnicity

Category	Total
Age	
0-4	551
5-11	7182
12-14	15431
15-17	22146
18-20	4301
21-24	3679
25-44	21361
45-64	15045
65 and over	2186
Age Not Known	210083
Gender	
Male	37673
Female	46019
Gender Unknown	218273
Race	
White	65271
Black or African American	11596
Native Hawaiian/Other Pacific Islander	501
Asian	0
American Indian/Alaska Native	0
More Than One Race (not OMB required)	0

Race Not Known or Other (not OMB required)	224597
Ethnicity	
Hispanic or Latino	4016
Not Hispanic or Latino	75391
Ethnicity Unknown	222558

Question 1: Describe the data collection system you used to collect the NOMs data (e.g., MDS, DbB, KIT Solutions, manual process).

Missouri used the MDS and manual process data collection system.

Question 2: Describe how your State's data collection and reporting processes record a participant's race, specifically for participants who are more than one race.

Indicate whether the State added those participants to the number for each applicable racial category or whether the State added all those participants to the More Than One Race subcategory.

Missouri collected and recorded a participant's race through the MDS and a manual collection process. Participants who were more than one race were reported either under a single race or "race not know or other" - the state does not use more than one race category.

Footnotes:

V: Performance Indicators and Accomplishments

Table 32 - Prevention Performance Measures - Population-Based Programs And Strategies; Measure: Number of Persons Served By Age, Gender, Race, And Ethnicity

Category	Total
Age	
0-4	0
5-11	155401
12-14	236434
15-17	237019
18-20	242574
21-24	350934
25-44	1534432
45-64	1610290
65 and over	349690
Age Not Known	0
Gender	
Male	2339805
Female	2376969
Gender Unknown	0
Race	
White	3982643
Black or African American	589322
Native Hawaiian/Other Pacific Islander	0
Asian	33288
American Indian/Alaska Native	111521
More Than One Race (not OMB required)	0

Race Not Known or Other (not OMB required)	0
Ethnicity	
Hispanic or Latino	179956
Not Hispanic or Latino	4536818
Ethnicity Unknown	0

Footnotes:

V: Performance Indicators and Accomplishments

Table 33 - Prevention Performance Measures - Number of Persons Served by Type of Intervention

Number of Persons Served by Individual- or Population-Based Program or Strategy

Intervention Type	A. Individual-Based Programs and Strategies	B. Population-Based Programs and Strategies
1. Universal Direct		N/A
2. Universal Indirect	N/A	
3. Selective		N/A
4. Indicated		N/A
5. Total	0	0

Footnotes:
Missouri is opting out of this form.

V: Performance Indicators and Accomplishments

Table 34 - Prevention Performance Measures - Number of Evidence-Based Programs by Types of Intervention

1. Describe the process the State will use to implement the guidelines included in the above definition.

Missouri utilizes the Strategic Prevention Framework model to implement the four guidelines. The process includes: assessment of the community needs and readiness; capacity building to mobilize and address the needs of the community; development of a prevention plan to identify the activities, programs, and strategies necessary to address the needs; implementation of the prevention plan; and, evaluation of the results to achieve sustainability and cultural competency. Missouri identifies appropriate strategies based on validated research, empirical evidence of effectiveness, and the use of local, state, and federal key community prevention leaders such as National Prevention Network and SAMHSA's Center for Substance Abuse Prevention. The Division of Behavioral Health ultimately determines whether or not a chosen intervention falls under the parameters of the guidelines.

2. Describe how the State collected data on the number of programs and strategies. What is the source of the data?

Missouri collects data on the number of programs and strategies through a combined electronic and manual collection process utilizing monthly progress and fidelity reporting forms.

Table 34 - SUBSTANCE ABUSE PREVENTION Number of Evidence-Based Programs and Strategies by Type of Intervention

	A. Universal Direct	B. Universal Indirect	C. Universal Total	D. Selective	E. Indicated	F. Total
1. Number of Evidence-Based Programs and Strategies Funded	300	353	653	91	0	744
2. Total number of Programs and Strategies Funded	300	353	653	91	0	744
3. Percent of Evidence-Based Programs and Strategies	100.00 %	100.00 %	100.00 %	100.00 %		100.00 %

Footnotes:

V: Performance Indicators and Accomplishments

Table 35 - Prevention Performance Measures - Total Number of Evidence-Based Programs and Total SAPTBG Dollars Spent on Evidence-Based Programs/Strategies

	Total Number of Evidence-Based Programs/Strategies for IOM Category Below	Total SAPT Block Grant Dollars Spent on evidence-based Programs/Strategies
Universal Direct	Total # 559	\$ 3262399.00
Universal Indirect	Total # 705	\$ 640937.00
Selective	Total # 170	\$ 2024155.00
Indicated	Total # 0	\$ 0.00
	Total EBPs: 1434	Total Dollars Spent: \$5927491.00

Footnotes:

V: Performance Indicators and Accomplishments

Prevention Attachments

Submission Uploads

FFY 2014 Prevention Attachment Category A:		
File	Version	Date Added

FFY 2014 Prevention Attachment Category B:		
File	Version	Date Added

FFY 2014 Prevention Attachment Category C:		
File	Version	Date Added

FFY 2014 Prevention Attachment Category D:		
File	Version	Date Added

Footnotes: